



SMA Specialty Medical Lab

Toll Free: (877) 697-6252 • Fax: (888) 322-9524

940 Pennsylvania Blvd., Unit A, Feasterville, PA 19053
40 Exchange Place, Suite 601, New York, NY 10005

2962 SW 26th Terrace, Suite 108, Dania Beach, FL 33312

Phone: (954) 306-3667 • Fax: (954) 306-3157

Toxicology Requisition

PATIENT INFORMATION

Last Name First Name M.I.

Street Address Apt# City State ZIP

Phone SSN D.O.B. M ☐
F ☐

INSURANCE INFORMATION

Insurance Name I.D. # Group#

ICD-10 CODES

PATIENT CONSENT AND AUTHORIZATION:

I supplied accurate and true information with this form. If I supplied insurance information, I authorize payment of my insurance benefits directly to SMA. I authorize SMA to be my Designated Representative and to appeal any denial of health benefits. I understand SMA may be out of network with my plan, and I accept responsibility for paying to SMA any amounts my insurer determines are my responsibility after calculating deductibles, co-payments and co-insurance due under my policy. I understand I am legally responsible for sending SMA any money received from my health insurance company for performance of this laboratory test. I also allow the release of medical information necessary to process this claim.

Patient Signature

Date

PROVIDER AUTHORIZATION TO TEST:

I am authorized to order laboratory tests and hereby order the tests indicated below. I confirm these test(s) are medically necessary for the treatment of the patient. I supplied accurate and true information on this form. I am aware information has been supplied to the patient about drug testing and that the patient has consented to the testing through his/her signature on this form. I understand that it is my responsibility to document medical necessity for testing in the patient record and to provide a copy of the same to SMA upon request.

Physician Signature

Date

SPECIMEN COLLECTION

Specimen Type: _____ Date Collected: _____

Time Collected: _____ AM / PM

☐ Urine temperature checked within 4 minutes of collection and is between 90 - 100° F or 32 - 38° C

POCT SCREENING PANEL PERFORMED WITH THE FOLLOWING RESULTS:

Pos.	Neg.	Pos.	Neg.	Pos.	Neg.	Pos.	Neg.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

To confirm POCT results mark Pos. or prescribed Neg. on SMA Urine Definitive Test Menu.
If no POCT has been performed, please choose any of SMA screening panels from the menu below:

URINE DEFINITIVE (CONFIRMATION) TEST MENU (Select the class or individual drug)

- | | | | |
|---|--|--|---|
| 1083 <input type="checkbox"/> Amphetamines
Amphetamine <input type="checkbox"/>
Methamphetamine <input type="checkbox"/>
1407 <input type="checkbox"/> Phentermine
1272 <input type="checkbox"/> D,L-Methamphetamine
1131 <input type="checkbox"/> Methylphenidate metabolite
Ritalinic acid
1084 <input type="checkbox"/> Antidepressants
Amitriptyline metabolite <input type="checkbox"/>
Duloxetine <input type="checkbox"/>
Fluoxetine <input type="checkbox"/>
Paroxetine <input type="checkbox"/>
Sertraline <input type="checkbox"/>
Venlafaxine <input type="checkbox"/>
Anticonvulsants
1132 <input type="checkbox"/> Gabapentin
1133 <input type="checkbox"/> Pregabalin
1429 <input type="checkbox"/> Antipsychotics
Paliperidone
(Risperidone metabolite)
Aripiprazole metabolite
Haloperidol
Loxapine
Clozapine metabolite
Ziprasidone
Olanzapine
1191 <input type="checkbox"/> Quetiapine | 1085 <input type="checkbox"/> Benzodiazepines
7-Aminoclonazepam <input type="checkbox"/>
α-Hydroxyalprazolam <input type="checkbox"/>
α-Hydroxymidazolam <input type="checkbox"/>
α-Hydroxytriazolam <input type="checkbox"/>
Hydroxyethylflurazepam <input type="checkbox"/>
Lorazepam <input type="checkbox"/>
Nordiazepam <input type="checkbox"/>
Oxazepam <input type="checkbox"/>
Temazepam <input type="checkbox"/>
1088 <input type="checkbox"/> Sedative Hypnotics (Z-drugs)
Zaleplon <input type="checkbox"/>
Zolpidem <input type="checkbox"/>
Zopiclone <input type="checkbox"/>
1099 <input type="checkbox"/> Spice-K2
JWH 122 <input type="checkbox"/>
JWH 210 <input type="checkbox"/>
JWH 250 <input type="checkbox"/>
1263 <input type="checkbox"/> Illicit Common
Cocaine metabolite <input type="checkbox"/>
Heroin metabolite <input type="checkbox"/>
MDMA (Ecstasy) <input type="checkbox"/>
MDA <input type="checkbox"/>
MDEA <input type="checkbox"/>
Phencyclidine (PCP) <input type="checkbox"/> | 1264 <input type="checkbox"/> Illicit Esoteric
25I-NBOMe <input type="checkbox"/>
Carfentanyl <input type="checkbox"/>
Flakka <input type="checkbox"/>
Kratom <input type="checkbox"/>
Krokodil <input type="checkbox"/>
Levamisole <input type="checkbox"/>
Psilocin <input type="checkbox"/>
U-47700 <input type="checkbox"/>
W-18 <input type="checkbox"/>
1156 <input type="checkbox"/> Ketamine
1194 <input type="checkbox"/> Nicotine Metabolite
Cotinine
1087 <input type="checkbox"/> Muscle Relaxants
Cyclobenzaprine <input type="checkbox"/>
metabolite
Meprobamate <input type="checkbox"/>
(Carisoprodol metabolite)
1180 <input type="checkbox"/> Buprenorphine
Buprenorphine <input type="checkbox"/>
Norbuprenorphine <input type="checkbox"/>
1183 <input type="checkbox"/> Tapentadol | 1265 <input type="checkbox"/> Opiates & Opioids
Codeine <input type="checkbox"/>
Morphine <input type="checkbox"/>
Hydrocodone <input type="checkbox"/>
Norhydrocodone <input type="checkbox"/>
(Hydrocodone metabolite)
Hydrodromorphone <input type="checkbox"/>
Naloxone <input type="checkbox"/>
Naltrexone metabolite <input type="checkbox"/>
Dextromethorphan <input type="checkbox"/>
Meperidine metabolite <input type="checkbox"/>
1266 <input type="checkbox"/> Oxycodone and Metabolites
Oxycodone <input type="checkbox"/>
Oxymorphone <input type="checkbox"/>
Nor oxycodone <input type="checkbox"/>
1267 <input type="checkbox"/> Methadone
Methadone <input type="checkbox"/>
EDDP <input type="checkbox"/>
1186 <input type="checkbox"/> Norfenentanyl (Fentanyl)
Fentanyl metabolite
1184 <input type="checkbox"/> O-desmethyl-Tramadol |
|---|--|--|---|

URINE PRESUMPTIVE (SCREENING) TEST MENU

#512 Drug Screen9	Confirm(+) Results <input type="checkbox"/>	Screen Only <input type="checkbox"/>
#1116 Drug Screen13	Confirm(+) results <input type="checkbox"/>	Screen Only <input type="checkbox"/>
#1077 Drug Screen19	Confirm(+) results <input type="checkbox"/>	Screen Only <input type="checkbox"/>

Please refer to the reverse side of the requisition for the details on the urine Screenin panels

ORAL FLUID DEFINITIVE TEST MENU

- | | | | | | |
|--|--|--|---|--|---|
| 1083 <input type="checkbox"/> Amphetamines
Amphetamine
Methamphetamine
1234 <input type="checkbox"/> Methylphenidate metabolite
Ritalinic acid | 1235 <input type="checkbox"/> Benzodiazepines
Alprazolam
Clonazepam
Diazepam
Lorazepam
Nordiazepam | Midazolam
Temazepam
1201 <input type="checkbox"/> Illicit
Cocaine
Heroin metabolite
Kratom | MDA
MDEA
MDMA
PCP
1226 <input type="checkbox"/> Ketamine
1213 <input type="checkbox"/> Buprenorphine | 1268 <input type="checkbox"/> Opiates & Opioids
Codeine
Morphine
Hydrocodone
Hydromorphone
Naltrexone metabolite | Naloxone
Meperidine
1221 <input type="checkbox"/> Methadone
1222 <input type="checkbox"/> Fentanyl
1239 <input type="checkbox"/> Oxycodone & Metabolites
Oxycodone
Oxymorphone
Noroxycodone |
|--|--|--|---|--|---|

PRESCRIBED MEDICATIONS (alphabetically within each class)

- | | | | | |
|--|---|---|--|---|
| Amphetamines
<input type="checkbox"/> Adderall
<input type="checkbox"/> Desoxyn
<input type="checkbox"/> Dexedrine
<input type="checkbox"/> Phentermine
<input type="checkbox"/> Ritalin | Anticonvulsants
<input type="checkbox"/> Neurontin (Gabapentin)
<input type="checkbox"/> Lyrica (Pregabalin)
Antipsychotics
<input type="checkbox"/> Seroquel | Benzodiazepines
<input type="checkbox"/> Ativan
<input type="checkbox"/> Dalmane
<input type="checkbox"/> Halcion
<input type="checkbox"/> Klonopin
<input type="checkbox"/> Librium
<input type="checkbox"/> Midazolam
<input type="checkbox"/> Oxazepam
<input type="checkbox"/> Restoril
<input type="checkbox"/> Valium
<input type="checkbox"/> Xanax | Muscle Relaxants
<input type="checkbox"/> Flexeril
<input type="checkbox"/> Meprobamate
<input type="checkbox"/> Soma
Opiates & Opioids
<input type="checkbox"/> Buprenorphine
<input type="checkbox"/> Codeine
<input type="checkbox"/> Demerol
<input type="checkbox"/> Dextromethorphan
<input type="checkbox"/> Dilaudid
<input type="checkbox"/> Fentanyl
<input type="checkbox"/> Methadone
<input type="checkbox"/> MS Contin
<input type="checkbox"/> Morphine
<input type="checkbox"/> Naloxone | Others (please print)

Norco
<input type="checkbox"/> Nycynta
<input type="checkbox"/> Percocet
<input type="checkbox"/> Saboxone
<input type="checkbox"/> Tramadol
<input type="checkbox"/> Tylenol 3
<input type="checkbox"/> Vicodin
<input type="checkbox"/> Vivitrol |
|--|---|---|--|---|

URINE PRESUMPTVE (SCREENING) PANELS

Please note, each subsequent screening panel includes the previous panel and contains additional drugs

#512 Drug Screen 9
Amphetamines
Barbiturates
Benzodiazepines
Cannabinoids (THC)
Cocaine
Ethyl glucuronide (ETG)
Methadone
Opiates
PCP
Validity

1116 Drug Screen 13
Amphetamines
Barbiturates
Benzodiazepines
Cannabinoids
Cocaine
Ecstasy (MDMA)
Ethyl glucuronide (ETG)
Ethanol
Methadone
Opiates
Oxycodone
PCP
Propoxyphene
Validity

1077 Drug Screen 19
Amphetamines
Barbiturates
Benzodiazepines
Buprenorphine
Cannabinoids
Cocaine
EDDP
Ecstasy (MDMA)
Ethanol
Ethyl glucuronide (ETG)
Heroin metabolite
Meperidine
Methadone
Opiates
Oxycodone
Phencyclidine (PCP)
Propoxyphene
Tramadol
Tricyclic Antidepressants (TCA)*
Validity
* Please note Amitriptyline and Nortriptyline are the only TCA included in SMA confirmation panel but Screened positive result may be caused by other drugs of TCA class present in a specimen

URINE PRESUMPTVE (SCREENING) PANELS

SMA will test the validity of each **urine specimen** by analyzing Creatinine levels, Specific Gravity, Oxidants and pH

Definitions

Presumptive testing - performed to indicate possible presence or absence of drug or drug class. All enzyme immunoassay (EIA) tests are considered presumptive.

Definitive testing - performed to identify and quantify drug and/or associated metabolite presence or absence. LC/MS/MS and GC/MS are the most common technique for definitive testing. This technique is also employed to confirm presumptive test results.

Medical necessity

Insurance carriers limit coverage of drug testing to medically necessary and reasonable tests relevant to the individual patient's medical situation. It is the physician's responsibility to only order tests that are medically necessary.