

**Overview****Method Name**

Liquid Chromatography/Tandem Mass Spectrometry (LC/MS/MS)

**NY State Available**

Yes

**Specimen****Specimen Type**

Varies

**Specimen Required**

Submit only 1 of the following specimens:

**Plasma**Draw blood in a green-top (sodium heparin) tube(s), **plasma gel tube is not acceptable**. Spin down and send 2 mL sodium heparin plasma refrigerated in a plastic vial.**Serum**Draw blood in a plain, red-top tube(s), **serum gel tube is not acceptable**. Spin down and send 2 mL of serum refrigerated in a plastic vial.**Specimen Minimum Volume**

0.5 mL

**Reject Due To**

Hemolysis	NA
Lipemia	NA
Icterus	NA
Other	NA

**Specimen Stability Information**

Specimen Type	Temperature	Time	Special Container
Varies	Refrigerated (preferred)	7 days	
	Frozen	25 days	
	Ambient	72 hours	

**Clinical & Interpretive****Reference Values**

Units: ng/mL

Expected steady state plasma levels in patients receiving recommended daily dosages: 109.0 - 585.0 ng/mL

**Performance****PDF Report**

No

**Day(s) Performed**

Monday through Sunday

**Report Available**

5 to 9 days

**Performing Laboratory Location**

Medtox Laboratories, Inc.

**Fees & Codes****Fees**

- Authorized users can sign in to [Test Prices](#) for detailed fee information.
- Clients without access to Test Prices can contact [Customer Service](#) 24 hours a day, seven days a week.
- Prospective clients should contact their account representative. For assistance, contact [Customer Service](#).

**Test Classification**

This test was developed and its performance characteristics determined by LabCorp. It has not been cleared or approved by the Food and Drug Administration.

**CPT Code Information**

80299

**LOINC® Information**

Test ID	Test Order Name	Order LOINC® Value
FARI	Aripiprazole	38893-4

Result ID	Test Result Name	Result LOINC® Value
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Z2233	Aripiprazole	38893-4
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