

TEST CHANGE

Tetrahydrocannabinol (THC) Marijuana Metabolite, Meconium,

Qualitative

0092316, CONFTHC M

Specimen Requirements:

Patient Preparation:

Collect: All meconium (blackish material) excreted until milk/formula

based stool (yellow-green) appears.

Specimen Preparation: <u>Transport all available meconium (2g is preferred) to routine</u>

urine collection cup or Security Kit for Meconium/Umbilical
Drug Detection (ARUP supply #51548) available online through
eSupply using ARUP Connect(TM) or by contacting ARUP

Effective Date: January 21, 2025

Client Services at 800-522-2787.

Transport 0.5 g (equivalent to 1/2 inch cube) for each separate

confirmation required. (Min: 0.13 g or 1/4 inch cube)

Transport Temperature: Room temperature.

Unacceptable Conditions:

Remarks:

Stability: Ambient: 1 week; Refrigerated: 3 months; Frozen: 1 year

Methodology: Qualitative Liquid Chromatography-Tandem Mass

Spectrometry (LC-MS/MS)

Performed: Sun-Sat

Reported: 1-4 days

Note:

CPT Codes: 80349 (Alt code: G0480)

New York DOH Approval Status: This test is New York DOH approved.

Interpretive Data:

Drugs Covered: 9-carboxy-THC

Positive cutoff: 5 ng/g

Methodology: Mass spectrometry

This test is designed

Meconium begins to form between the 12th and 16th week of gestation. Meconium drug testing can detect and document exposure that occurred maternal drug use during approximately the last trimester of a full-term pregnancy. 4 to a common metabolite months of pregnancy THC (which may be present in cannabis products). Alternative testing is available to detect other drug exposures. The pattern and frequency of drug(s) used by the mother cannot be determined by this



test..- A negative result does not exclude the possibility that a mother used drugs during pregnancy. Detection of drugs in meconiumdrug use depends on extent of maternal drug use, the quantity and quality of the specimen tested as well as drug stability, unique characteristics the pattern and frequency of drug deposition in meconium, and the performance of the analytical method. Drugs administered during labor and deliveryn(s) used by mother. The concentration value must be greater than or drugs administered directly to the toinfant after birth may be detected. Detection of drugs in meconium does not insinuate impairment and may not affect outcomes for equal to the infant.cutoff to be reported as positive. Interpretive questions should be directed to the laboratory.

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This test does not distinguish between the delta-8 and delta-9 forms of THC or their metabolites. For medical purposes only; not valid for forensic use.

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the U.S. Food and Drug Administration. This test was performed in a CLIA-certified laboratory and is intended for clinical purposes.

Reference Interval: