

TRAINING UPDATE

Lab Location: Department:

FWMC Core lab, Chemistry/Urinalysis

Date Distributed: 9/22/25 Due Date: 10/1/25 Implementation: 10/1/25

DESCRIPTION OF PROCEDURE REVISION

Name of procedure:

AHC.C 1002 Profile®-V MEDTOXScan® Drugs of Abuse Test System (FWMC only) with

QC log, AG.FW16

Description of change(s):

- The MedTox SOP has been converted to an AHC format.
- The FWMC MedTox SOP, FWMC-LAB-CHEM-0060 will be retired on October 1, 2025.
- The new SOP will become effective on that date.
- The procedure has also been revised to <u>require pH testing of each sample</u> before performing the MedTox drug screen analysis. The pH result will be entered on the QC form.

Read the new SOP with pH testing to ensure you understand.

Take the quiz.

Document your compliance with this training update by taking the quiz in the MTS system.

AHC.C 1002 Profile®-V MEDTOXScan® Drugs of Abuse Test System (FWMC only)

Copy of version 1.0 (approved, not yet effective)

Last Approval or

9/20/2025

Uncontrolled Copy printed on 9/22/2025 3:55 PM

Adventist HealthCare

Periodic Review Completed

Next Periodic Review Needed On or Before

9/20/2027

Printed By Demetra Collier (110199)

Organization

Effective Date

10/1/2025

Approval and Periodic Review Signatures

Туре	Description	Date	Version	Performed By	Notes
Approval	Lab Director	9/20/2025	1.0	Senda Beltaifa	
				Senda Beltaifa MD	
Approval	Core lab approvals	9/17/2025	1.0	Robert SanLuis	
			10.	Robert SanLuis	

Version History

Version	Status	Туре	Date Added	Date Effective	Date Retired
1.0	Approved, Not Yet Effective	Initial version	9/15/2025	10/1/2025	Indefinite
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Title: Profile®-V MEDTOXScan® Drugs of Abuse Test System

Technical SOP

Title	Profile®-V MEDTOXScan® Drugs of	Abuse Test System
Prepared by	Demetra Collier	Date: 9/11//25
Owner	Rob SanLuis	Date: 9/11/25

Laboratory Approval	Local Effective Date:				
Print Name and Title	Signature	Date			
Refer to the electronic signature page					
for approval and approval dates.					

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Title: Profile®-V MEDTOXScan® Drugs of Abuse Test System

1. **TEST INFORMATION**

Assay	Method/Instrument	Test Code
Qualitative Drug Screen	Profile®-V MEDTOXScan®	UDRGT or UDRGW /w TCA

Synonyms/Abbreviations
Urine Drug Screen; Tox screen

Department	
Chemistry	
CON	
ANALYTICAL PRINCIPLE	
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2. ANALYTICAL PRINCIPLE

The PROFILE-V MEDTOXScan® Drugs of Aouse Test System includes the one-step, competitive, membrane-based immunochromatographic PROFILE®-V MEDTOXScan® Test Device and the MEDTOXScan® Reader, which in erprets and reports the test results automatically. A single urine sample can be evaluated for the presence of each of the classes of drugs specified in a single PROFILE-V MEDTOXScan® Test Device. The PROFILE®-V MEDTOXScan® Test Device includes antibody-colloidal gold, arug-conjugates and a control line.

ANTIBODY-COLLOIDAL GOLD Mouse monoclonal antibodies were developed that bind specifically to the drug class being tested. The individual monoclonal antibodies were adsorbed to colloidal gold and dried onto the test device.

DRUG-CONJUGATES DRUGS from each class to be tested were individually conjugated to bovine serum albumin (BSA) or IgG. Each drug conjugate is immobilized on a test line at a designated position on the membrane strip.

CONTROL LINE EACH test strip has anti-mouse antibody immobilized at the Control position of the membrane strip. The anti-mouse antibody will bind excess antibody-colloidal gold, indicating that the reagents are working properly.

When the urine sample is placed in the sample well of a test strip, the dried antibody-colloidal gold on the sample pad dissolves and the urine wicks up the white strips carrying the reddishpurple antibody-colloidal gold with it. The PROFILE®-V MEDTOXScan® Drugs of Abuse Test System will detect specific classes of drugs in urine because drug(s) in the urine and the drug(s) conjugated to the protein compete to bind to the antibody-colloidal gold. A test line will form when drug in the sample is below the detection threshold (negative result).

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The MEDTOXScan® Reader scans the test device and utilizes a contact imaging sensor (CIS) to capture relative line intensities. Software algorithms and barcodes are used to identify the test device, the drug tests associated with the test device and whether the presence or absence of a line is associated with a negative or positive result, respectively. The results of the scans are displayed on the MEDTOXScan® Reader screen or, optionally, can be printed.

The PROFILE®-V MEDTOXScan® Test Devices can only be used with the MEDTOXScan® Reader. The MEDTOXScan® Reader is an instrument used to interpret and report the results of the PROFILE®-V MEDTOXScan® Test Device. The PROFILE®-V MEDTOXScan® Test Devices cannot be visually read.

The PROFILE®-V MEDTOXScan® Drugs of Abuse Test System is for in vitro diagnostic use and is intended for prescription use only. It is not intended for use in point-of-care settings.

The PROFILE®-V MEDTOX Scan® Drugs of Abuse Test System detects drug classes at the following cutoff concentrations:

	` (3			T	
		Va				
AMP	Amphetamine	500		MTD	Methadone	200
	(d-Amphetamine)	ng/mL				ng/mL
BAR	Barbituates (Butalbital)	200	C	O PI	Opiates (Morphine)	100
	·	ng/mL	4	· Jan		ng/mL
BZO	Benzodiazepine	150		OXX	Oxycodone	100
	(Nordiazapam)	ng/mL			<u> </u>	ng/mL
BUP	Buprenorphine	10		PCP	Pocncyclidine	25 ng/mL
		ng/mL			· CO	
COC	Cocaine	150		THC	Canna binoids	50 ng/mL
	(Benzoylecgonine)	ng/mL				
mAMP	Methamphetamine	500		TCA	Tricyclic	300ng/mL
		ng/mL			Antidepressants	

3. SPECIMEN REQUIREMENTS

3.1 Patient Preparation

Component	Special Notations			
Specimen Collection and/or Timing	Freshly voided urine specimens should be used for testing.			

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Title: Profile®-V MEDTOXScan® Drugs of Abuse Test Adventist HealthCare Site: Fort Washington Medical Center

Component	Special Notations
Special Collection Procedures	No additives or preservatives. Adulteration of the urine specimen may cause erroneous results. If adulteration is suspected, obtain a fresh specimen. Urine specimens should be handled and treated as if they are potentially infected. Preferred method is the Urine Collection Kit with specimen transferred to Urine Chemistry Collection Tube (yellow top).
Other	If Urine Collection Kit is not used, submit to Laboratory within 2 hours of collection.

System

3.2 Specimen Type & Handling

Criteria	
Type -Preferred	Urine
-Other Acceptable	None
Collection Container	Trine Collection Kit or sterile container
Volume - Optimum	link
- Minimum	2 mI
Transport Container and	Urine Chemistry Collection Tube (yellow top- preservative
Temperature	free) or container at room temperature
Stability & Storage	Room Temperate: Test samples immediately
Requirements	Refrigerated: Up to 2 days 2-8°C
	Frozen: -20°C up to 1 month
Timing Considerations	Stored urine must be brought to ambient temperature 18-
	25°C and mixed well to assure homogeneous sample prior
	to testing.
Unacceptable Specimens	Specimens that are unlabeled, improperly labeled, or those
& Actions to Take	that do not meet the stated criteria are unacceptable.
	Samples in Urine Analysis Preservative Tube are NOT
	acceptable.
	Request a recollection and credit the test with the
	appropriate LIS English text code for "test not performed"
	message. Examples: Quantity not sufficient-QNS; Wrong
	collection-UNAC. Document the request for recollections
	in the LIS.
Compromising Physical	The Medtox Drugs of Abuse system is only for use with
Characteristics	unadulterated preservative free, human urine samples
	Urines that are either extremely acidic (below pH 4.0) or
	basic (pH above 9.0) may produce erroneous results. If
	adulteration is suspected, obtain a new sample and re-test.
Other Considerations	Clear polystyrene containers may absorb some drugs; use
	of polypropylene container is advised.

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NOTE: Labeling requirements for all reagents, calibrators and controls include: (1) Open date, (2) Substance name, (3) Lot number, (4) Date of preparation, (5) Expiration date, (6) Initials of tech, and (7) Any special storage instructions. Check all for visible signs of degradation.

4. REAGENTS

The package insert for a new lot of kits must be reviewed for any changes before the kit is used. A current Package Insert is included as a Related Document.

4.1 Reagent Summary

Reagents / Kits	Supplier & Catalog Number		
PROFILE®-V MED OXScan®	MEDTOX Catalog # 604032		
Drugs of Abuse Test System kit			
Multistix 10 SG Reagent Strips for	Siemens Reagent Strips Cat. # 2161		
Urinalysis (for pH testing)			

4.2 Reagent Preparation and Storage

Assay Kit: PROFILE®-V MEDTOXScan®) Drugs of Abuse Test System kit			
Contents:	Twenty-five (25) test devices in individual foil packages		
	Twenty-five (25) disposable pipette tips		
Storage	The kit, in its original packaging, should be stored at 2-25°C		
Stability	Stable until the expiration date or the label		
Preparation	Not applicable		

5. CALIBRATORS/STANDARDS

Not Applicable

6. QUALITY CONTROL

6.1 Controls Used

Controls	Supplier and Catalog Number		
Positive and Negative QC Device	Catalog # 833075		
MEDTOX Negative	Catalog # 101183		
MEDTOX Positive	Catalog # 102367		

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6.2 Control Preparation and Storage

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Control	MEDTOX Toxicology Urine Controls (Negative and Positive)		
Preparation	Allow controls to come to room temperature. Mix by gentle inversion. DO NOT SHAKE.		
Storage/Stability	Unopened:		
	• The controls are stable until the expiration on the box when stored at -10 to -20°C and protected from light		
	or		
	• The controls are stable until the expiration on the box when stored at 2-8°C		
	After Opening:		
7	• The controls are stable for six months or until the expiration date, whichever comes first, when stored at -10 to -20°C (Controls can be aliquoted and frozen)		
	• The controls are stable for 31 days or until the expiration date, whichever comes first, when stored tightly capped 2-8%		
	Thaw controls as needed. Allow to come to room temperature followed by gentle swirling before use.		

MEDTOXScan® QC Testing Device

6.3 Frequency

- MEDTOX Toxicology Urine Controls (liquid) are performed once per week and with each new lot # or shipment of kit/devices.
- MEDTOX QC devices (neg and pos) are performed and documented daily.
- Internal controls must be documented with each test performed.
- QC devices and external QC should also be run in the following circumstances:
 - Whenever you suspect that the reader or test device is not working properly
 - After any maintenance; after using cleaning device.
 - If you have an unexpected result

6.4 Tolerance Limits and Criteria for Acceptable QC

- Internal QC: The MEDTOXScan® Reader must report the result as Valid
- QC Devices: Negative and Positive QC devices: run daily and must report as expected

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Site: Fort Washington Medical Center System

- Do not place any adhesive label on the devices
- Do not apply any type of liquid on to the devices
- Do not touch strips in viewing window of devices
- Replace QC test devices if strips are damaged
- **Keep** QC test device in sealed pouch while not in use

• External Positive and Negative QC:

IF	THEN
Control results are not as expected	7. Make sure the kit and QC have been stored properly
A.	• Use the cleaning device
100	• Repeat the test using a new test device or a new kit, or lot # in that order as appropriate
	If the above steps do not resolve the problem, suspend testing and notify your supervisor or tech in charge.
	Consult with the vendor.

NOTE: The laboratory director or designee may override rejection of partial or complete runs. Justification for the override must be documented in detail.

6.5 Documentation

Record patient results and QC on the MEDTOXScan Drugs of Abuse Quality Control Log (AG. FW16).

6.6 Quality Assurance Program

- Each new lot number of reagent or new shipment of the same lot of reagent must be tested with external control materials and previously analyzed samples.
 Performance of the new lot must be equivalent to the previous lot; utilize published TEA for acceptability criteria.
- Training must be successfully completed and documented prior to performing this
 test. This procedure must be incorporated into the departmental competency
 assessment program.
- The laboratory participates in CAP proficiency testing. All proficiency testing materials must be treated in the same manner as patient samples.
- Consult the Laboratory QC Program for complete details.

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7. **EQUIPMENT and SUPPLIES**

7.1 **Assay Platform**

MEDTOXScan® Reader

7.2 **Equipment**

- Refrigerator
- Printer
- Barcode Scanner

7.3 **Supplies**

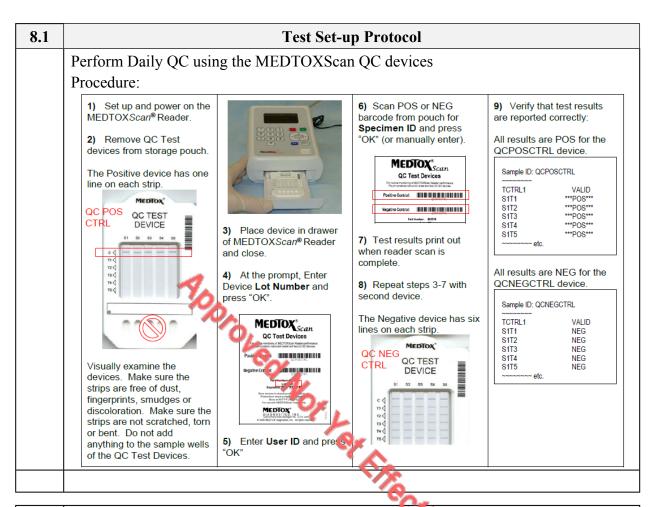
- PROFILE®-V MED TOx Scan®) Drugs of Abuse Test System kit
- Pipette tips
- Positive and Negative QC Test Devices
- Cleaning Cassette (for use as needed)
- MiniPetTM pipettor (MEDTOX Part# 8330
- Printer paper
- MEDTOX Toxicology Urine Controls (External QC)
- Multistix 10 SG Reagent Strips

8. **PROCEDURE**

NOTE: For all procedures involving specimens, buttoned lab coats, gloves, and face protection are required minimum personal protective equipment. Report all accidents to your supervisor.

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8.2	Test Run
1.	Using a Multistix 10 SG test strip, test the pH of patients urine sample by dipping test strip into urine completely covering the pH pad. Blot the side of the strip on a clean piece of gauze to remove excess sample. Read the pH value at the appropriate time. Record the pH on the QC log (AG.FW16).
	If sample pH is within the 4.0 to 9.0 pH range, proceed with testing. If the pH is < 4.0 or > 9.0 notify the patient's caregiver and request a new sample. Notify your supervisor.
2.	Open one pouch for each sample to be tested and mark the PROFILE®-V MEDTOXScan® Test Device. Label the device with patient identification. Make sure you only mark along the left edge of the test device (labeled "ID >")
	(You may notice a reddish-purple color in the sample well. This is normal, do not discard the test). Note: Ifdevice was stored refrigerated, allow it to come to room temperature (64-77°F before opening and using.)

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8.2	Test Run				
3.	 Dispense 75μL of urine into sample well (indicated by				
	• Grasp the MiniPe TM t under its collar using the index and middle fingers. With the thumb, depress the plunger <u>completely</u> .				
	• Holding the MiniPet TM vertically (straight up and down) lower the yellow tip no more than ½ inch into the urine specimen.				
	With tip in the urine specimen slowly and smoothly release the plunger allowing it to rise <u>completely</u> .				
	• Visually inspert the urine sample in the tip. Ensure there are no air bubbles and that no excess urine is on the outer surface of the tip.				
	Hold the pipette tip directly over sample well. Depress plunger completely to dispense the intire contents of urine into <u>one</u> sample well of the testing device.				
4.	Repeat Step 2 for all sample wells with above them. Wipe off any spills on the device.				
5.	Place the test device in the MEDTOXScan [®] Reader cassette drawer and close the drawer immediately. The reader will read the bare of e on the test device and determine its part number andtest configuration. It will prompt the user to enter Lot#, User ID#, and Specimen ID#, which can all be entered using the MEDTOXScan [®] Reader keypad or handheld barcode scanner. The MEDTOXScan [®] Reader will begin timing the assay once it detects the				
	barcode and results will be displayed after the scan and analysis are complete.				
6.	Discard disposable yellow MiniPet sample tip into a biohazard Sharps container. Store the MiniPet in a dry, secure location at room temperature (18-25 °C).				
	If the MiniPet becomes damaged or does not function properly, it must be replaced. Notify your supervisor for replacement.				

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Title: Profile®-V MEDTOXScan® Drugs of Abuse Test Adventist HealthCare Site: Fort Washington Medical Center

NOTE: In the event that the test system becomes inoperable, notify supervision or designee for further direction. Patient specimens must be stored in a manner that maintains the integrity of the specimen.

System

9. **CALCULATIONS**

None

10. REPORTING RESULTS AND REPEAT CRITERIA

10.1 **Interpretation of Data**

The MEDTOXScan® Reader will automatically read the control and test lines at the correct positions and display the test results for each drug. Results will print. The Reader displays the results as either "NEG" for a negative result, "POS" for a preliminary positive result, o "INVALID" for an invalid result. "VALID" will be displayed if valid results are chained. PROFILE® - V MEDTOX Scan ® Test Nor tex liftective devices cannot be visually read

10.2 Rounding

N/A

10.3 **Units of Measure**

N/A

Clinically Reportable Range (CRR) 10.4

N/A

10.5 **Review Patient Data**

- Review patient results for unusual patterns, trends or distribution.
- Report atypical or unexpected results or trends for this test to appropriate supervisory personnel, prior to releasing results.

Repeat Criteria and Resulting 10.6

IF the result is	THEN	
Positive	Report as "preliminary result is Detected, confirm by	
	another method.	

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Negative	Report as Not Detected
Invalid	Do not report. Repeat the test with a new test device.

Message Code	Message
Verified by repeat analysis	Append –REP to the result

11. **EXPECTED VALUES**

11.1 **Reference Ranges**

None detected

11.2

One dete. Critical Values None established Standard Required Messages 11.3

12. **CLINICAL SIGNIFICANCE**

This test system is used to screen urine samples for one or more of the following drug classes prior to confirmatory testing:

Amphetamine (d-amphetamine) is detected on the Test Device only at the (AMP) position, methamphetamine (MAMP) is detected at the (MAMP) position. The amphetamines are a group of drugs that are central nervous system stimulants. This group includes amphetamine and methamphetamine.

Barbiturates (BAR) are a group of structurally related prescription drugs that are used to reduce restlessness and emotional tension, induce sleep and to treat certain convulsive disorders.

Benzodiazepines (BZO), a group of structurally related central nervous system depressants, are primarily used to reduce anxiety and induce sleep.

Buprenorphine (BUP) is a potent analgesic often used in the treatment of opiate abusers. Cocaine (COC) is a central nervous system stimulant. Its primary metabolite is benzoylecgonine.

Methadone (MTD) is a synthetic opioid used clinically as a maintenance drug for opiate abusers and for pain management.

Opiates (OPI) are a class of natural and semi-synthetic sedative narcotic drugs that

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include morphine. codeineand heroin.

Oxycodone (OXY) (Oxycontin®, Percodan, Percocet) is a semi synthetic narcotic analgesic that is prescribed for moderately severe pain. It is available in both standard and sustained release oral formulations. Oxycodone is metabolized to Oxymorphone and Noroxycodone.

Phencyclidine (PCP) is a hallucinogenic drug.

Tricyclic Antidepressants (TCA) are a group of structurally related prescription drugs that are used to managedepression

Marijuana (THC) is a hallucinogenic drug derived from the hemp plant. Marijuana contains a number of active ingredients collectively known as Cannabinoids. ROCEDURE NOTES

FDA Status: Cleared 510(k)

Validated Test Modifications: None

13. PROCEDURE NOTES

14. LIMITATIONS OF METHOD

- The PROFILE®MEDTOXScan® Drugs of Abuse Test System is only for use with unadulterated preservative free, human urine samples Wine samples that are either extremely acidic (below pH 4.0) orbasic (above pH 9.0) may produce erroneous results. If adulteration is suspected, obtain an additional specimen and re-test. Clear polystyrene containers may absorb some drugs; use of polyprocylene containers is advised.
- A presumptive positive result for any drug does not indicate the level of intoxication, administration route or concentration of that drug in the urine specimen.
- 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.
- Place PROFILE®-V MEDTOXScan® Test Devices in MEDTOXScan® Reader immediately after adding the sample. Once the test device has been read in the MEDTOXScan® Reader, it must not be reinserted for a repeat reading, as the ten minute timing will begin again. If a repeat reading is required, rerun the sample on a fresh test cassette.
- The PROFILE®-V MEDTOXScan® Drugs of Abuse Test System is not intended for use in point-of-caresettings.
- There is a possibility that other substances and/or factors, e.g. technical or procedural errors, mayinterfere with the test and cause false results
- Gas Chromatography/Mass Spectroscopy is the recommended confirmatory method for most drugs. HPLC or LC/MS/MS is the preferred confirmatory method for Tricyclic

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System

Antidepressants and Benzodiazepines. Any of the drugs being tested for in the PROFILE-V MEDTOXScan5 Drugs of AbuseTest System may give a preliminary positive result if ingested at prescribed therapeutic doses

- The PROFILE®-V MEDTOXScan® Drugs of Abuse Test System cannot distinguish between abused drugs and certain prescribed medications. A positive test may be obtained from certain foods or food supplements.
- The PROFILE®-V MEDTOXScan® Test Devices must be used only with the MEDTOXScan® Reader. They cannot be visually read.

14.1 Analytical Measurement Range (AMR)

N/A

14.2 Precision

See manufacturers package insert for details.

14.3 Interfering Substances

Refer to Limitations of Method (above)

14.4 Clinical Sensitivity/Specificity/Predictive Values

The PROFILE®-V MEDTOXScan® Drugs of Abuse Test System detects one or more of the following drugs at the cutoff levels listed below.

AMP	Amphetamine	500 ng/mL	
BAR	Barbiturates (Butaibital)	200 ng/mL	
BZO	Benzodiazepines (Nordiazepine)	150 ng/mL	
BUP	Buprenorphine	10 ng/mL	
COC	Benzoylecgonine	150 nglmL	
MAMP	Metharnphetamine	500 ng/mL	
MTD	Methadone	200 ng/mL	
OPI	Morphine	100 ng/mL	
OXY	Oxycodone	100 ng/mL	
PCP	Phencyclidine	25 ng/mL	
THC	11-nor-9-carboxy-Δ ⁹ -THC	50 ng/mL	
TCA	Tricyclic Antidepressants (Desipramine)	300 ng/mL	

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Site: Fort Washington Medical Center System

15. SAFETY

Refer to the safety manuals and Safety Data Sheet (SDS) for detailed information on safety practices and procedures and a complete description of hazards.

16. RELATED DOCUMENTS

- 1. Laboratory Safety Manual
- 2. Safety Data Sheets (SDS)
- 3. Laboratory Quality Control Program
- 4. Repeat Testing Requirements (Lab policy)
- 5. Current Allowable Total Error Specifications at http://questnet1.qdx.com/Business Groups/Medical/qc/docs/qc bpt tea.xls
- 6. MEDTOXScan Drugs Abuse Test QC Log (AG.FW 16)
- 7. Lot to Lot Cross Check Log (AG.F104)

17. REFERENCES

- 1. Profile®-V MEDTOXScan® Drugs of Abuse Test System, pkg insert (rev. 3/24)
- 2. MEDTOXScan QC Test Devices, Inservey. 3/18)
- 3. MESTOX /toxicology Urine Controls, Pkg 'nsert (4/14)

18. REVISION HISTORY

Version	Date	Section	Reason	Reviser	Approval
	9/15/25		This SOP preceded by FWMC- LAB_CHEM 0600 Profile®-V MEDTOXScan Drugs of Abuse Test System (retired)	O Collier	R SanLuis

19. ADDENDA

MEDTOXScan® Troubleshooting Procedure Using QC test Device

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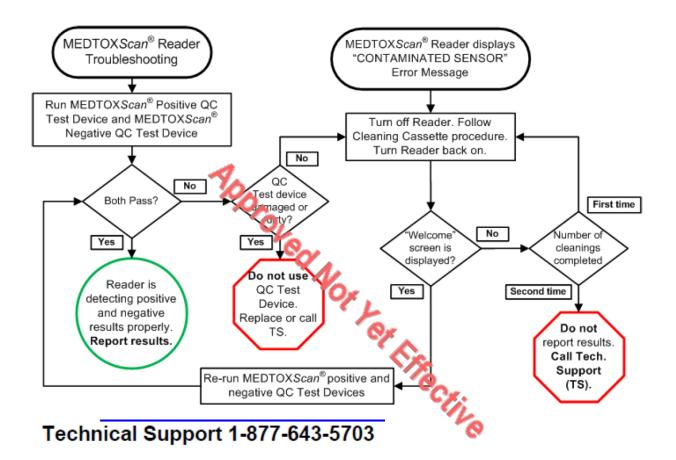
Title: Profile®-V MEDTOXScan® Drugs of Abuse Test

System

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Addendum:

MEDTOXScan® Troubleshooting Procedure Using QC test Device



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MEDTOX SCAN DRUGS OF ABUSE TEST QUALITY CONTROL LOG

Fort Washington Medical Center

- 1. External Controls are performed once per week and with each new lot of devices.
- 2. QC Test devices are run daily.
- 3. **Internal controls** must be documented each time the test is performed.
- 4. If QC results are not acceptable, document corrective action. Do not accept patient results before reviewing QC results for proper reactions.

Positive Control	Negative Control	Patient MRN	Patient MRN	
Attach print out	Attach print out	Attach print out	Attach print out	
	1/0	Top of		
		Crective		
Internal QC Valid? ☐ Yes ☐ No	Internal QC Valid? ☐ Yes ☐ No	Internal QC Valid? ☐ Ye		No
m 1 1	m 1 1	Sample pH	Sample pH	
Tech code:	Tech code:	Tech code:	Tech code:	
Weekly review:	Weekly review:		Monthly review:	



MEDTOX SCAN DRUGS OF ABUSE TEST QUALITY CONTROL LOG

Fort Washington Medical Center

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- 2. **Internal controls** must be documented each time the test is performed.
- 3. If QC results are not acceptable, document corrective action. Do not accept patient results before reviewing QC results for proper reactions.

Patient	Patient	Patient	Patient
Attach print out	Attach print out	Attach print out	Attach print out
Internal QC Valid? ☐ Yes ☐ No	Internal QC Valid? ☐ Yes ☐ No	Internal QC Valid? ☐ Yes	□ No Internal QC Valid? □ Yes □ No
Sample pH	Sample pH	Sample pH	Sample pH
Tech code:	Tech code:	Tech code:	Tech code:
Weekly review:	Weekly review:	N	Monthly review: