

## “DIAQUICK” Multi-Drug Panels

for human urine samples

<b>Multi-3 Drug Panel</b>	BZO, COC, MOP
- REF Z06576CE	Cont.: 30 panels, individually packed (30x REF Z06576B)
- REF Z06576B	Cont.: 1 panel, individually packed
<b>Multi-3/1 Drug Panel</b>	BUP, MOP, MTD
- REF Z09577CE	Cont.: 30 panels, individually packed (30x REF Z09577B)
- REF Z09577B	Cont.: 1 panel, individually packed
<b>Multi-4 Drug Panel</b>	AMP, COC, MOP, THC
- REF Z02575CE	Cont.: 30 panels, individually packed (30x REF Z02575B)
- REF Z02575B	Cont.: 1 panel, individually packed
<b>Multi-5 Drug Panel</b>	BZO, COC, MET, MOP, THC
- REF Z05236CE	Cont.: 30 panels, individually packed (30x REF Z05236B)
- REF Z05236B	Cont.: 1 panel, individually packed
<b>Multi-5/3 Drug Panel</b>	AMP, COC, MET, MOP, THC
- REF Z06502CE	Cont.: 30 panels, individually packed (30x REF Z06502B)
- REF Z06502B	Cont.: 1 panel, individually packed
<b>Multi-5/4 Drug Panel</b>	AMP, COC, MDMA, MOP, THC
- REF Z11504CE	Cont.: 30 panels, individually packed (30x REF Z11504B)
- REF Z11504B	Cont.: 1 panel, individually packed
<b>Multi-5/6 Drug Panel</b>	AMP, BZO, COC, MOP, THC
- REF Z06506CE	Cont.: 30 panels, individually packed (30x REF Z06506B)
- REF Z06506B	Cont.: 1 panel, individually packed
<b>Multi-6 Drug Panel</b>	BZO, COC, MET, MOP, MTD, THC
- REF Z98907CE	Cont.: 30 panels, individually packed (30x REF Z98907B)
- REF Z98907B	Cont.: 1 panel, individually packed
<b>Multi-6/1 Drug Panel</b>	AMP, BZO, COC, MET, MOP, THC
- REF Z03220CE	Cont.: 30 panels, individually packed (30x REF Z03220B)
- REF Z03220B	Cont.: 1 panel, individually packed
<b>Multi-6/3 Drug Panel</b>	BUP, BZO, COC, MTD, OPI, THC
- REF Z08930CE	Cont.: 30 panels, individually packed (30x REF Z08930B)
- REF Z08930B	Cont.: 1 panel, individually packed
<b>Multi-6/4 Drug Panel</b>	AMP, BUP, BZO, MET, MOP, THC
- REF Z08940CE	Cont.: 30 panels, individually packed (30x REF Z08940B)
- REF Z08940B	Cont.: 1 panel, individually packed
<b>Multi-6/6 Drug Panel</b>	BUP, COC, MET, MOP, MTD, THC
- REF Z13960CE	Cont.: 30 panels, individually packed (30x REF Z13960B)
- REF Z13960B	Cont.: 1 panel, individually packed
<b>Multi-6/7 Drug Panel</b>	BUP, BZO, COC, MOP, MTD, THC
- REF Z09970CE	Cont.: 30 panels, individually packed (30x REF Z09970B)
- REF Z09970B	Cont.: 1 panel, individually packed
<b>Multi-6/10 Drug Panel</b>	AMP, BZO, COC, MOP, MTD, THC
- REF Z11911CE	Cont.: 30 panels, individually packed (30x REF Z11911B)
- REF Z11911B	Cont.: 1 panel, individually packed
<b>Multi-7 Drug Panel</b>	AMP, BUP, BZO, COC, MTD, MOP, THC
- REF Z12730CE	Cont.: 30 panels, individually packed (30x REF Z12730B)
- REF Z12730B	Cont.: 1 panel, individually packed
<b>Multi-10 Drug Panel</b>	AMP, BAR, BZO, COC, MDMA, MET, MOP, MTD, TCA, THC
- REF Z06230CE	Cont.: 30 panels, individually packed (30x REF Z04230B)
- REF Z04231CE	Cont.: 10 panels, individually packed (10x REF Z04230B)
- REF Z04230B	Cont.: 1 panel, individually packed
<b>Multi-10/1 Drug Panel</b>	AMP, BAR, BZO, BUP, COC, MDMA, MET, MOP, MTD, TCA, THC
- REF Z06235CE	Cont.: 30 panels, individually packed (30x REF Z05235B)
- REF Z06236CE	Cont.: 10 panels, individually packed (10x REF Z05235B)
- REF Z05235B	Cont.: 1 panel, individually packed
<b>Multi-10/2 Drug Panel</b>	AMP, BAR, BZO, COC, MDMA, MOP, MTD, OPI, TCA, THC
- REF Z06102CE	Cont.: 30 panels, individually packed (30x REF Z06102B)
- REF Z06102B	Cont.: 1 panel, individually packed
<b>Multi-10/3 Drug Panel</b>	AMP, BZO, COC, MDMA, MOP, MTD, OPI, PCP, TCA, THC
- REF Z06103CE	Cont.: 30 panels, individually packed (30x REF Z06103B)
- REF Z06103B	Cont.: 1 panel, individually packed
<b>Multi-10/4 Drug Panel</b>	AMP, BAR, BUP, BZO, COC, MDMA, MET, MTD, OPI, THC
- REF Z06104CE	Cont.: 30 panels, individually packed (30x REF Z06104B)
- REF Z06104B	Cont.: 1 panel, individually packed
<b>Multi-10/5 Drug Panel</b>	AMP, BAR, BZO, BUP, COC, MET, MOP, MTD, TCA, THC
- REF Z06105CE	Cont.: 30 panels, individually packed (30x REF Z06105B)
- REF Z06105B	Cont.: 1 panel, individually packed
<b>Multi-10/6 Drug Panel</b>	AMP, BAR, BZO, COC, MET, MOP, MTD, PCP, TCA, THC
- REF Z06106CE	Cont.: 30 panels, individually packed (30x REF Z06106B)
- REF Z06106B	Cont.: 1 panel, individually packed
<b>Multi-10/7 Drug Panel</b>	AMP, BAR, BZO, COC, MET, MTD, OPI, PCP, TCA, THC
- REF Z06107CE	Cont.: 30 panels, individually packed (30x REF Z06107B)
- REF Z06107B	Cont.: 1 panel, individually packed

All products contain a package insert!

For in vitro diagnostic use only. For use by medical professionals only.  
For diagnosis and therapeutic monitoring only.

### INTENDED USE

The “DIAQUICK” Multi-Drug Panels (urine) are rapid, lateral flow chromatographic immunoassays for the simultaneous, qualitative detection of the following drugs and their metabolites:

Parameter	Code	Calibrator Substance	Cut-off
Amphetamine	AMP	d-Amphetamine	1 000 ng/mL
Barbiturates	BAR	Secobarbital	300 ng/mL
Buprenorphine	BUP	Buprenorphine	10 ng/mL
Benzodiazepines	BZO	Oxazepam	300 ng/mL
Cocaine	COC	Benzoylecgonine	300 ng/mL
EDDP (Methadone Metabolite)	EDDP	2-Ethylidene-1,5-dimethyl-3,3-diphenylpyrrolidine	300 ng/mL
Ethylglucuronide	ETG	Ethyl-β-D-Glucuronide	500 ng/mL
Fentanyl	FYL	Norfentanyl	20 ng/mL
Ketamine	KET	Ketamine	1 000 ng/mL
LSD	LSD	Lysergic acid diethylamide	20 ng/mL
Ecstasy	MDMA	(±)-3,4-Methylenedioxymethamphetamine HCl	500 ng/mL
Methamphetamine	MET	d-Methamphetamine	1 000 ng/mL
Opiates, Morphine, Heroin	MOP	Morphine	300 ng/mL

Methadone	MTD	Methadone	300 ng/mL
Opiate, Morphine, Heroin	OPI	Morphine	2 000 ng/mL
Oxycodone	OXY	Oxycodone	100 ng/mL
Phencyclidine	PCP	Phencyclidine	25 ng/mL
Propoxyphene	PPX	d-Propoxyphene	300 ng/mL
Tricyclic Antidepressants	TCA	Nortriptyline	1 000 ng/mL
Marijuana/Cannabis	THC	11-nor-A9-THC-9-COOH	50 ng/mL
Tramadol	TRA	cis-Tramadol	100 ng/mL
Synthetic Marijuana	K2	JWH-018 5-Pentanoic acid	50 ng/mL
Zolpidem	ZOL	Zolpidem	50 ng/mL

This test will detect other related compounds, please refer to the Analytical Specificity table in this insert. 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 obtained. For in vitro diagnostic use only

### TEST PRINCIPLE

The “DIAQUICK” Multi-Drug Panels (urine) are immunoassays based on the principle of competitive binding. Drugs which may be present in the urine specimen compete against their respective drug conjugate for binding sites on their specific antibody. 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 coated on the particles. The antibody coated particles will then be captured by the immobilized drug conjugate and a visible colored line will show up in the test line region of the specific drug strip. The colored line will not form in the test line region if the drug level is above its cut-off concentration because it will saturate all the binding sites of the antibody coated on the particles. A drug-positive urine specimen will not generate a colored line in the specific test line region of the strip because of drug competition, while a drug-negative urine specimen or a specimen containing a drug concentration less than the cut-off will generate a line in the test line region. To serve as a procedural control, a colored line will always appear at the control line region indicating that proper volume of specimen has been added and membrane wicking has occurred.

### WARNINGS AND PRECAUTIONS

- For medical and other in vitro diagnostic use only. Do not use after the expiration date.
- 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 panels should be discarded according to federal, state and local regulations.

### REAGENTS

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.

### STORAGE

The “DIAQUICK” Multi-Drug Panels can be stored refrigerated or at room temperature (2-30°C). The test panel is stable through the expiration date printed on the sealed pouch. The test panel must remain in the sealed pouch until use. DO NOT FREEZE. Do not use beyond the expiration date.

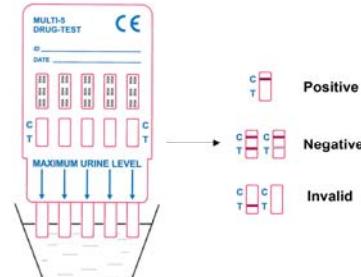
### SAMPLE COLLECTION AND PREPARATION

The urine must be collected in a clean and dry container. Urine collected at any time of the day may be used. Urine specimens exhibiting visible precipitations should be centrifuged, filtered or allowed to settle to obtain a clear specimen for testing. Urine specimens may be stored at 2-8°C for up to 48 h prior to testing. For prolonged storage, specimens may be frozen and stored below -20°C. Frozen specimens should be thawed and mixed before testing.

### ASSAY PROCEDURE

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

1. Remove the test panel from the sealed pouch and use it as soon as possible.
2. Take off the protective cap plugged on the test panel. With arrows pointing towards the urine specimen, immerse the test panel vertically into the urine specimen for 10-15 seconds. Do not allow the urine sample to touch the plastic cassette when immersing the test device into the urine sample. Avoid immersion of the cassette deeper than the mark indicated with the arrows on the device and avoid any direct contact of the sample with the test region.
3. Put the protective cap back onto the test panel. Place the test panel on a non-absorbent flat surface, start the timer and wait for the red line(s) to appear. Read the results at 5 minutes. Do not interpret results after 10 minutes.



### INTERPRETATION OF RESULTS

**NEGATIVE:** A colored line in the control region (C) and a colored line in the test line (T) for a specific drug indicate a negative results. This indicates that the drug concentration in the urine specimen is below the designated cut-off level for that specific drug.

\*NOTE: The shade of color in the test region (T) may vary, but it should be considered negative whenever there is even a faint pink line.

**POSITIVE:** A colored line in the control line region (C) but no line in the test line region (T) for a specific drug indicates a positive results. This indicates that the drug concentration in the urine specimen exceeds the designated cut-off level.

**INVALID:** Control line fails to appear. Insufficient specimen volume or incorrect procedural techniques are the most likely reasons for control line failure. Review the procedure and repeat the test using a new test panel. If the problem persists, discontinue using the lot immediately and contact your local distributor.

### QUALITY CONTROL

A procedural control is included in the test. A red 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 "DIAQUICK" Multi-Drug Panels (urine) provide only a preliminary analytical result. A more specific chemical method must be used to obtain a confirmed result. Gas chromatography/mass spectrometry (GC/MS) is the preferred confirmatory method.
- It is possible that technical or procedural errors, as well as other interfering substances in the urine specimen may cause erroneous results.
- Adulterants, such as bleaching agents 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.
- A positive result indicates presence of the drug or its metabolites but does not indicate the level of intoxication, administration route or concentration in urine.
- A negative result may not necessarily indicate drug-free urine. Negative results can be obtained if a drug is present but below the cut-off level of the test.
- The "DIAQUICK" Multi-Drug Panels (urine) do not distinguish between drugs of abuse and certain medications.
- A positive result might be obtained from certain foods or food supplements.

### PERFORMANCE CHARACTERISTICS

#### ACCURACY

A side-by-side comparison of the "DIAQUICK" Multi-Drug Panels and a commercially available rapid drug test was conducted. Testing was performed on approx. 100 specimens previously collected from subjects present for drug screen testing. The agreement was > 99.9 % for all tests.

A side-by-side comparison of the "DIAQUICK" DOA Dipsticks and GC/MS at the cut-off level of the tests was conducted. Testing was performed on 250 specimens previously collected from subjects present for drug screen testing. The following results were tabulated.

#### % Agreement with GC/MS

	Positive Agreement	Negative Agreement	Total Results
<b>AMP</b>	98.1 %	97.9 %	98.0 %
<b>BAR</b>	96.1 %	98.6 %	97.6 %
<b>BUP</b>	99.1 %	> 99.9 %	99.6 %
<b>BZO</b>	98.4 %	99.2 %	98.8 %
<b>COC</b>	98.2 %	97.8 %	98.0 %
<b>EDDP</b>	97.9 %	99.4 %	98.8 %
<b>ETG</b>	97.6 %	99.4 %	98.8 %
<b>FYL</b>	98.8 %	99.4 %	99.2 %
<b>KET</b>	97.5 %	98.2 %	98.0 %
<b>LSD</b>	94.3 %	98.5 %	97.0 %
<b>MDMA</b>	98.1 %	99.3 %	98.8 %
<b>MET</b>	96.2 %	97.1 %	96.8 %
<b>MOP</b>	95.0 %	95.3 %	95.2 %
<b>MTD</b>	98.9 %	98.8 %	98.8 %
<b>OPI</b>	96.7 %	93.8 %	95.2 %
<b>OXY</b>	97.7 %	99.4 %	98.8 %
<b>PCP</b>	92.4 %	96.8 %	95.2 %
<b>PPX</b>	96.0 %	94.0 %	94.8 %
<b>TCA</b>	94.8 %	91.6 %	92.8 %
<b>THC</b>	97.9 %	98.1 %	98.0 %
<b>TRA</b>	88.2 %	92.4 %	90.8 %
<b>K2</b>	97.5 %	98.2 %	98.0 %
<b>ZOL</b>	90.9 %	97.1 %	95.6 %

### ANALYTICAL SPECIFICITY

The following tables lists the concentration of compounds (ng/mL) that are detected positive in urine by the "DIAQUICK" Multi-Drug Panels (urine) at 5 minutes.

<b>AMPHETAMINE</b>	<b>AMP</b>	<b>BARBITURATES</b>	<b>BAR</b>
D,L-Amphetamine sulfate	300	Amobarbital	5 000
L-Amphetamine	25 000	5,5-Diphenylhydantoin	8 000
(±) 3,4-Methylenedioxymphetamine	500	Allobarbital	600
Phentermine	800	Barbital	8 000
Maprotiline	50 000	Talbutal	200
Methoxyphenamine	6 000	Butabital	8 000
<b>D-Amphetamine</b>	<b>1 000</b>	Phenobarbital	300
<b>BUPRENORPHINE</b>	<b>BUP</b>	Cyclopentobarbital	30 000
Buprenorphine	10	Pentoobarbital	8 000
Norpseudoephedrine	50	Alphenol	600
Buprenorphine 3-D-Glucuronide	50	Aprobarbital	500
Norpseudoephedrine 3-D-Glucuronide	100	Butabarbital	200
<b>BENZODIAZEPINES</b>	<b>BZO</b>	Butethal	500
Alprazolam	100	<b>Secobarbital</b>	<b>300</b>
a-hydroxyalprazolam	1 500	<b>COCAINE</b>	<b>COC</b>
Bromazepam	900	Benzoyllecgonine	300
Chlordiazepoxide	900	Cocaine HCl	200
Clobazam	200	Cocacthylene	20 000
Clonazepam	500	Ergonine HCl	30 000
Clorazepate dipotassium	500	<b>METHADONE METABOLITE</b>	<b>EDDP</b>
Delorazepam	900	2-Ethyldene-1,5-dimethyl-3,3-diphenylpyrrolidine (EDDP)	300
Desalkylflurazepam	200	<b>ETHYGLUCURONIDE</b>	<b>ETG</b>
Diazepam	300	Ethyl-β-D-Glucuronide	500
Estazolam	6 000	Propyl-β-D-Glucuronide	50 000
(±) Lorazepam	3 000	Morphine-3-β-Glucuronide	100 000
RS-Lorazepam glucuronide	200	Morphine-6-β-Glucuronide	100 000
Midazolam	6 000	Ethanol	100 000
Nitrazepam	200	Methanol	100 000
Norchlor diazepoxide	100	<b>FENTANYL</b>	<b>FYL</b>
Nordiazepam	900	Afentanyl	600 000
<b>Oxazepam</b>	<b>300</b>	Fenfluramine	50 000
Temazepam	100	<b>Norfentanyl</b>	<b>20</b>
Triazolam	3 000	Busporine	15 000
<b>KETAMINE</b>	<b>KET</b>	Fentanyl	100
Ketamine	1 000	Sufentanyl	50 000
Benzphetamine	25 000	<b>LSD</b>	<b>LSD</b>
(+)-Chlorpheniramine	25 000	<b>Lysergic Acid Diethylamide</b>	<b>20</b>
Clonidine	100 000	<b>ECSTASY</b>	<b>MDMA</b>
Dextromethorphan	2 000	(±) 3,4-Methylenedioxymethamphetamine HCl (MDA)	500
Disopyramide	25 000	(±) 3,4-Methylenedioxymethamphetamine HCl (MDA)	3,000
<b>EDDP</b>	<b>50 000</b>	4-Aminodiphenylaminophenylmethane (ADM)	300
Mephentermine	25 000	4-Hydroxyphencyclidine	50 000
(1R, 2S)-(-)-Ephedrine	100 000	o-Hydroxymethamphetamine	MET
4-Hydroxyphencyclidine	50 000	D-hydroxymethamphetamine	25 000

Levorphanol	50 000	<b>D-Methamphetamine</b>	<b>1 000</b>
MDE	50 000	L-Methamphetamine	20 000
Tetrahydrozoline	500	(±)-3,4-Methylenedioxymethamphetamine	12 500
d-Methamphetamine	50 000	Mephentermine	50 000
l-Methamphetamine	50 000	<b>MORPHINE</b>	<b>MOP</b>
Methoxyphenamine	25 000	Codeine	200
(+)-3,4-Methylenedioxymethamphetamine	100 000	Ethylmorphine	6 000
d-Norpropyophene	25 000	Hydrocodone	50 000
Pentazocine	25 000	Hydromorphone	3 000
Phencyclidine	25 000	Levorphanol	1 500
Promazine	25 000	6-Monoacetyl morphine	300
Promethazine	25 000	Morphine 3-β-D-glucuronide	800
Thioridazine	50 000	<b>Morphine</b>	<b>300</b>
Meperidine	25 000	Normecine	6 000
<b>METHADONE</b>	<b>MTD</b>	Normorphine	50 000
Methadone	300	Oxycodeone	30 000
Doxylamine	100 000	Oxymorphone	50,000
<b>OPIATES</b>	<b>OPI</b>	Procaine	15,000
Codeine	2 000	Thebaine	6,000
Ethylmorphine	3 000	<b>TRICYCLIC ANTIDEPRESSANTS</b>	<b>TCA</b>
Hydrocodone	50 000	Nortriptyline	1 000
Hydromorphone	15 000	Nordoxepine	500
Levorphanol	25 000	Trimipramine	3 000
6-Monoacetyl morphine	3 000	Amitriptyline	1 500
Morphine 3-β-D-glucuronide	2 000	Promazine	3 000
<b>Morphine</b>	<b>2 000</b>	Desipramine	200
Norcocaine	25 000	Cyclobenzaprine	2 000
Normorphine	50 000	Imipramine	400
Oxycodeone	25 000	Clomipramine	50 000
Oxymorphone	25 000	Doxepine	2 000
Procaine	50 000	Maprotiline	2 000
Thebaine	25 000	Promethazine	50 000
<b>CANNABIS</b>	<b>THC</b>	Perphenazine	50 000
Cannabinol	35 000	Dithiaden	10 000
11-nor-Δ <sup>9</sup> -THC-9 COOH	30	<b>TRAMADOL</b>	<b>TRA</b>
<b>11-nor-Δ<sup>9</sup>-THC-9 COOH</b>	<b>50</b>	n-Desmethyl-cis-tramadol	200
Δ <sup>8</sup> -THC	17 000	<b>Cis-tramadol</b>	<b>100</b>
Δ <sup>9</sup> -THC	17 000	Procyclidine	100 000
<b>SPICE</b>	<b>K2</b>	o-Desmethyl-cis-tramadol	10 000
JWH-018 5-Pentanoic acid metabolite	50	Phencyclidine	100 000
JWH-073 4-butanoic acid metabolite	50	d,l-Desmethyl venlafaxine	50 000
JWH-018 4-Hydroxypentyl metabolite	400	<b>OXYCODONE</b>	<b>OXY</b>
JWH-018 5-Hydroxy pentyl metabolite	500	Oxycodeone	100
JWH-073 4-Hydroxybutyl metabolite	500	Oxymorphone	300
<b>ZOLPIDEM</b>	<b>ZOL</b>	Levorphanol	50 000
Zolpidem	50	Hydrocodone	25 000
<b>PROPOXYPHENE</b>	<b>PPX</b>	Hydromorphone	50 000
D-Propoxyphene	300	Naloxone	25 000
D-Norpropyophene	300	Naltrexone	25 000
<b>PHENCYCLIDINE</b>	<b>PCP</b>	Phencyclidine	25
4-Hydroxyphencyclidine	12 500		

### CROSS-REACTIVITY

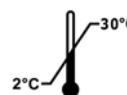
A study was conducted to determine the cross-reactivity of the test with compounds in either drug-free urine or drug positive urine. The following compounds did not show a cross-reactivity when tested with the "DIAQUICK" Multi-Drug Panels (urine) at a concentration of 100 µg/mL.

### Non Cross-Reacting Compounds:

Acetophenetidin	Cortisone	Zomepirac	d-Pseudoephedrine
N-Acetylpromainamide	Creatinine	Ketoprofen	Quinidine
Acetylsalicylic acid	Deoxycorticosterone	Labetalol	Quinine
Aminopyrine	Dextromethorphan	Loperamide	Salicylic acid
Amoxicillin	Diclofenac	Meprobamate	Serotonin
Ampicillin	Difunisal	Methoxyphenamine	Sulfamethazine
l-Ascorbic acid	Digoxin	Methylphenidate	Sulindac
Apomorphine	Diphenhydramine	Nalidixic acid	Tetracycline
Aspartame	Ethyl-p-aminobenzoate	Naproxen	Tetrahydrocortisone,
Atropine	β-Estradiol	Niacinamide	3-acetate
Benzilic acid	Estrone-3-sulfate	Nifedipine	Tetrahydrocortisone
Benzoic acid	Erythromycin	Norethindrone	Tetrahydrozoline
Bilirubin	Fenoprofen	Noscapine	Thiamine
d,l-Brompheniramine	Furosemide	Eurosemide	Thiordiazine
Caffeine	Gentisic acid	Ketoprofen	d,l-Tyrosine
Cannabidiol	Hemoglobin	Oxalic acid	Tolbutamide
Chlordiazepoxide	Hydralazine	Oxolinic acid	Triamterene
Chloramphenicol	Hydrochlorothiazide	Oxymetazoline	Trifluoperazine
Chlorothiazide	Hydrocortisone	Papaverine	Penicillin-G
d,l-Chlorpheniramine	o-Hydroxyhippuric acid	Perphenazine	Trimethoprim
Chlorpromazine	3-Hydroxytyramine	Phenelzine	d-Tryptophan
Cholesterol	d,l-Isoproterenol	Prednisone	Uric acid
Clonidine	Isoxsuprime	d,l-Propanolol	Verapamil

### REFERENCES

1. Basel, RC. Disposition of Toxic Drugs and Chemicals in Man. 2nd Ed. Biomedical Publ., Davis, CA, 1982; 488
2. Tietz NW. Textbook of Clinical Chemistry. W.B. Saunders Company. 1986; 1735
3. Hawks RL, CN Chiang. Urine Testing for Drugs of Abuse. National Institute for Drug Abuse (NIDA), Research Monograph 73, 1986.



## “DIAQUICK” Multi-Drogencassetten

für humane Urinproben

### Multi-3 Drogencassette

- REF Z06576CE
- REF Z06576B

### Multi-3/1 Drogencassette

- REF Z09577CE
- REF Z09577B

### Multi-4 Drogencassette

- REF Z02575CE
- REF Z02575B

### Multi-5 Drogencassette

- REF Z05236CE
- REF Z05236B

### Multi-5/3 Drogencassette

- REF Z06502CE
- REF Z06502B

### Multi-5/4 Drogencassette

- REF Z11504CE
- REF Z11504B

### Multi-5/6 Drogencassette

- REF Z06506CE
- REF Z06506B

### Multi-6 Drogencassette

- REF Z98907CE
- REF Z98907B

### Multi-6/1 Drogencassette

- REF Z03220CE
- REF Z03220B

### Multi-6/3 Drogencassette

- REF Z08930CE
- REF Z08930B

### Multi-6/4 Drogencassette

- REF Z08940CE
- REF Z08940B

### Multi-6/6 Drogencassette

- REF Z13960CE
- REF Z13960B

### Multi-6/7 Drogencassette

- REF Z09970CE
- REF Z09970B

### Multi-6/10 Drogencassette

- REF Z11911CE
- REF Z11911B

### Multi-7 Drogencassette

- REF Z12730CE
- REF Z12730B

### Multi-10 Drogencassette

- REF Z06230CE
- REF Z04231CE
- REF Z04230B

### Multi-10/1 Drogencassette

- REF Z06235CE
- REF Z06236CE
- REF Z05235B

### Multi-10/2 Drogencassette

- REF Z06102CE
- REF Z06102B

### Multi-10/3 Drogencassette

- REF Z06103CE
- REF Z06103B

### Multi-10/4 Drogencassette

- REF Z06104CE
- REF Z06104B

### Multi-10/5 Drogencassette

- REF Z06105CE
- REF Z06105B

### Multi-10/6 Drogencassette

- REF Z06106CE
- REF Z06106B

### Multi-10/7 Drogencassette

- REF Z06107CE
- REF Z06107B

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Nur für die in-vitro Diagnostik. Nur für die Diagnose und das Überwachen therapeutischer Maßnahmen. Nur für den Gebrauch durch medizinisches Personal.

### VERWENDUNGSZWECK

Die “DIAQUICK” Multi-Drogencassetten (Urin) sind immunochromatographische Schnelltests für den qualitativen Nachweis der folgenden Drogen und deren Metaboliten

Parameter	Code	Kalibratorsubstanz	Cut-off
Amphetamine	AMP	d-Amphetamine	1,000 ng/mL
Barbiturate	BAR	Secobarbital	300 ng/mL
Buprenorphin	BUP	Buprenorphin	10 ng/mL
Benzodiazepine	BZO	Oxazepam	300 ng/mL
Kokain	COC	Benzoylegonin	300 ng/mL
EDDP (Methadon-Metabolit)	EDDP	2-Ethyliden-1,5-dimethyl-3,3-diphenylpyrrolidin	300 ng/mL
Ethylglucuronid	ETG	Ethyl-β-D-Glucuronid	500 ng/mL
Fentanyl	FYL	Norfentanyl	20 ng/mL
Ketamin	KET	Ketamin	1,000 ng/mL
LSD	LSD	Lysergsäureidiethylamid	20 ng/mL
Ecstasy	MDMA	(±)-3,4-Methylenedioxymethamphetamine HCl	500 ng/mL
Methamphetamine	MET	d-Methamphetamine	1,000 ng/mL
Opiat, Morphin, Heroin	MOP	Morphin	300 ng/mL

Methodon	MTD	Methodon	300 ng/mL
Opiat, Morphin, Heroin	OPI	Morphin	2,000 ng/mL
Oxycodon	OXY	Oxycodon	100 ng/mL
Phencyclidin	PCP	Phencyclidin	25 ng/mL
Propoxyphen	PPX	d-Propoxyphen	300 ng/mL
Trizykliche Antidepressiva	TCA	Nortriptylin	1,000 ng/mL
Marijuana/Cannabis	THC	11-nor-A9-THC-9-COOH	50 ng/mL
Tramadol	TRA	cis-Tramadol	100 ng/mL
Synthetisches Marihuana	K2	JWH-018 5-Pentansäure	50 ng/mL
Zolpidem	ZOL	Zolpidem	50 ng/mL

Diese Tests erkennen auch andere, verwandte Substanzen; dazu bitte die Tabelle unter „Analytische Spezifität“ in dieser Gebrauchsanweisung beachten. Diese Tests liefern nur ein vorläufiges analytisches Ergebnis. Zur Bestätigung der Testergebnisse ist der Einsatz einer spezifischeren Nachweismethode erforderlich. Gaschromatographie/ Massenspektrometrie (GC/MS) ist die bevorzugte Bestätigungs methode.<sup>1,2</sup> Klinische Gesichtspunkte und eine professionelle Beurteilung sollten in die Interpretation jedes Drogentests einfließen, besonders dann, wenn erst ein vorläufiges positives Testergebnis vorliegt.

### TESTPRINZIP

Die “DIAQUICK” Multi-Drogencassetten sind Immunoassays, die auf dem Prinzip der kompetitiven Bindung basieren. Drogen, die im Urin vorkommen könnten, konkurrieren mit dem Drogenkonjugat um Bindungsstellen auf spezifischen Antikörpern. Während des Tests wandert die Urinprobe durch Kapillarkräfte aufwärts. Wenn Drogen in der Urinprobe unterhalb des Cut-Offs vorhanden sind, werden sie die Bindungsstellen auf den antikörperbeschichteten Partikeln nicht sättigen. Diese Partikel werden dann durch das immobilisierte Drogenkonjugat gebunden und eine gefärbte Testlinie wird in der Testlinienregion sichtbar. Die gefärbte Linie wird sich in der Testlinienregion nicht bilden, wenn der Drogenlevel den Cut-Off übersteigt, denn dann sind alle Bindungsstellen auf den antikörperbeschichteten Partikeln gesättigt. Eine drogen-positive Urinprobe wird aufgrund des kompetitiven Prinzips keine gefärbte Linie in der spezifischen Testregion bilden, wohingegen eine drogen-negative Urinprobe oder eine Probe, die eine Drogenkonzentration unterhalb des Cut-offs enthält, eine Linie in der Testregion bildet. Als Verfahrenskontrolle erscheint in der Kontrolllinienregion immer eine gefärbte Linie, was eine ausreichende Probenmenge und eine korrekte Sogwirkung der Membran anzeigen.

### WARNUNGEN UND VORSICHTSMASSNAHMEN

- Nur zur medizinischen und in-vitro diagnostischen Verwendung. Nicht nach dem Verfallsdatum verwenden.
- Die Testcassetten sollten bis zur Verwendung im versiegelten Beutel verbleiben.
- Alle Proben sollten als potentielle Infektionsquelle angesehen und entsprechend gehandhabt werden.
- Die verwendeten Testcassetten sollten gemäß nationalen und lokalen Bestimmungen entsorgt werden

### REAGENZIEN

Jede Testlinie enthält monoklonale mausantikörperbeschichtete Partikel und passende Drogen-Protein-Konjugate. Für die Kontrolllinie werden polyklonale Anti-Kaninchen IgG Ziegenantikörper und Kaninchen-IgG verwendet.

### LAGERUNG

Die “DIAQUICK” Multi-Drogencassetten können gekühlt oder bei Raumtemperatur (2 – 30 °C) gelagert werden. Die Tests sind bis zu dem auf dem Alubeutel aufgedruckten Verfallsdatum, haltbar. Die Tests müssen bis zur Verwendung im versiegelten Beutel verbleiben. NICHT EINFRIEREN. Nicht nach Ablauf des Verfallsdatums verwenden.

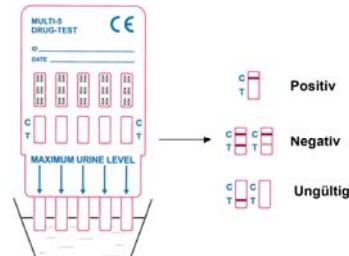
### PROBENSAMMLUNG UND -VORBEREITUNG

Die Urinproben müssen in einem sauberen und trockenen Behälter gesammelt werden. Der Zeitpunkt der Probenahme kann unabhängig von der Tageszeit gewählt werden. Urinproben, die sichtbare Niederschläge enthalten, sollten zentrifugiert, gefiltert oder absetzen gelassen werden, um eine klare Probe zur Testung zu erhalten. Urinproben können bis zur Verwendung bei 2-8°C maximal 48 h gelagert werden. Sollte eine längere Lagerung erforderlich sein, müssen die Proben eingefroren und bei unter -20°C gelagert werden. Gefrorene Proben müssen vollständig aufgetaut und vor der Verwendung gut durchmischt werden.

### TESTDURCHFÜHRUNG

Vor Testdurchführung müssen alle Proben, Kontrollen sowie die Testcassetten auf Raumtemperatur (15-30°C) gebracht werden.

1. Den Alubeutel vor dem Öffnen auf Raumtemperatur bringen. Die Testcassette aus dem versiegelten Beutel entnehmen und sobald wie möglich verwenden.
2. Die aufgesteckte Schutzkappe von der Testcassette nehmen. Den Teststreifen senkrecht mit den Pfeilen nach unten weisend für mind. 10-15 Sekunden in die Urinprobe tauchen. Die Urinprobe nicht in direkten Kontakt mit der Plastikkassette oder der Testregion bringen. Die Testcassette nicht tiefer als bis zu der von den Pfeilen angezeigten Markierung eintauchen.
3. Die Schutzkappe wieder auf die Testcassette aufstecken. Die Testcassette auf eine nicht saugfähige, ebene Fläche legen, die Stoppuhr starten und auf das Erscheinen der roten Linie(n) warten. Die Ergebnisse nicht nach mehr als 10 Minuten ablesen.



### INTERPRETATION DER ERGEBNISSE

**NEGATIV:** Eine farbige Linie in der Kontrollregion (C) und eine in der Testregion (T) eines spezifischen Parameters deuten auf ein negatives Ergebnis hin. Das deutet darauf hin, dass die Drogenkonzentration in der Urinprobe unterhalb der festgesetzten Nachweisgrenze des spezifischen Parameters ist.

\*ACHTUNG: Die Farbschattierung in der Testregion (T) kann variieren, wobei jede auch noch so schwache Testlinie als negativ angesehen werden sollte.

**POSITIV:** Eine farbige Linie in der Kontrollregion (C), jedoch keine in der Testregion (T) einer spezifischen Droge deutet auf ein positives Ergebnis hin. Das deutet darauf hin, dass die Drogenkonzentration in der Urinprobe oberhalb der festgesetzten Nachweisgrenze des spezifischen Parameters ist.

**UNGÜLTIG:** Die Kontrolllinie erscheint nicht. Ungenügend Probenvolumen oder falsche Testdurchführung sind die wahrscheinlichsten Ursachen für ein Versagen der Kontrolllinie. Die Durchführung überprüfen und den Test mit einer neuen Testcassette wiederholen. Bleibt das Problem bestehen, den Testkit nicht weiterverwenden und den lokalen Händler kontaktieren.



#### QUALITÄTSKONTROLLE

Eine Verfahrenskontrolle ist im Test integriert. Eine farbige Linie, die in der Kontrollregion (C) erscheint, wird als interne Verfahrenskontrolle gewertet. Sie bestätigt genügend Probenvolumen, ausreichende Membrandurchfeuchtung und eine korrekte Testdurchführung. Kontrollstandards werden mit diesem Test nicht mitgeliefert. Es wird jedoch empfohlen, dass Positiv- und Negativkontrollen im Zuge einer guten Laborpraxis getestet werden, um die Testdurchführung zu bestätigen und eine korrekte Testleistung zu überprüfen.

#### EINSCHRÄNKUNGEN

- Es ist möglich, dass technische oder Verfahrensfehler, sowie störende Substanzen im Urin falsche Ergebnisse verursachen.
- Verfälschende Substanzen, wie Bleichmittel in der Urinprobe können falsche Ergebnisse unabhängig von der verwendeten analytischen Methode verursachen. Wird Verfälschung vermutet sollte der Test mit einer anderen Urinprobe wiederholt werden.
- Ein positives Ergebnis deutet auf das Vorhandensein der Droge oder deren Metaboliten hin, sagt aber nichts über den Grad der Vergiftung, die Art der Einnahme oder der Konzentration im Urin aus.
- Ein negatives Ergebnis deutet nicht unbedingt auf einen drogenfreien Urin hin. Negative Ergebnisse werden auch erhalten, wenn die Droge unterhalb der Nachweisgrenze des Tests im Urin vorhanden ist.
- Die „DIAQUICK“ Multi-Drogencassetten unterscheiden nicht zwischen Drogen und bestimmten Medikamenten.
- Ein positives Ergebnis kann von bestimmten Nahrungsmitteln oder Nahrungsergänzungsmitteln verursacht werden.

#### LEISTUNGSDATEN

##### GENAUIGKEIT

Eine Vergleichsstudie der „DIAQUICK“ Multi-Drogencassetten und einem kommerzielle erhältlichen Schnelltest wurde durchgeführt. Ca. 100 Patientenproben wurden getestet. Die Übereinstimmung betrug > 99,9 % bei allen Tests.

Eine Vergleichsstudie der „DIAQUICK“ Multi-Drogencassetten und GC/MS im Cut-Off Bereich wurde mit je 250 Patientenproben durchgeführt. Die folgenden Ergebnisse wurden aufgezeichnet:

##### % Übereinstimmung mit GC/MS

	Positive Übereinstimmung	Negative Übereinstimmung	Gesamt-ergebnisse
AMP	98,1 %	97,9 %	98,0 %
BAR	96,1 %	98,6 %	97,6 %
BUP	99,1 %	> 99,9 %	99,6 %
BZO	98,4 %	99,2 %	98,8 %
COC	98,2 %	97,8 %	98,0 %
EDDP	97,9 %	99,4 %	98,8 %
ETG	97,6 %	99,4 %	98,8 %
FYL	98,8 %	99,4 %	99,2 %
KET	97,5 %	98,2 %	98,0 %
LSD	94,3 %	98,5 %	97,0 %
MDMA	98,1 %	99,3 %	98,8 %
MET	96,2 %	97,1 %	96,8 %
MOP	95,0 %	95,3 %	95,2 %
MTD	98,9 %	98,8 %	98,8 %
OPI	96,7 %	93,8 %	95,2 %
OXY	97,7 %	99,4 %	98,8 %
PCP	92,4 %	96,8 %	95,2 %
PPX	96,0 %	94,0 %	94,8 %
TCA	94,8 %	91,6 %	92,8 %
THC	97,9 %	98,1 %	98,0 %
TRA	88,2 %	92,4 %	90,8 %
K2	97,5 %	98,2 %	98,0 %
ZOL	90,9 %	97,1 %	95,6 %

#### ANALYTISCHE SPEZIFITÄT

Die folgenden Tabellen listet die Konzentration der Substanzen (ng/mL), die nach 5 min. mit den „DIAQUICK“ Multi-Drogencassetten im Urin als positiv nachgewiesen werden.

AMPHETAMIN	AMP	BARBITURATE	BAR
D,L-Amphetamineulfat	300	Amobarbital	5 000
L-Amphetamine	25 000	5,5-Diphenylhydantoin	8 000
(±) 3,4-Methylenedioxyamphetamine	500	Allobarbital	600
Phentermin	800	Barbital	8 000
Maprotilin	50 000	Talbutal	200
Methoxyphenamin	6 000	Butalbital	8 000
D-Amphetamine	1 000	Phenobarbital	300
BUPRENORPHIN	BUP	Cyclopentobarbital	30 000
Buprenorphin	10	Pentobarbital	8 000
Norpurenophrin	50	Alphenol	600
Buprenorphin 3-D-Gluronid	50	Aprobarbital	500
Norpurenophrin 3-D-Gluronid	100	Butabarbital	200
<b>BENZODIAZEPINE</b>	<b>BZO</b>	Butethal	500
Alprazolam	100	<b>Secobarbital</b>	300
a-hydroxyalprazolam	1 500	<b>COCAIN</b>	<b>COC</b>
Bromazepam	900	Benzoylcegonin	300
Chlordiazepoxid	900	Cocain HCl	200
Clobazam	200	Cocathylene	20 000
Clonazepam	500	Ecgogn HCl	30 000
Clorazepam dipotassium	500	<b>METHADONMETABOLIT</b>	<b>EDDP</b>
Delorazepam	900	2-Ethylen-1,5-dimethyl-3,3-diphenylpyrrolidin (EDDP)	300
Desalkylflurazepam	200	<b>ETHYGLUCURONID</b>	<b>ETG</b>
Diazepam	300	Ethyl-β-D-Glucuronid	500
Estazolam	6 000	Propyl-β-D-Glucuronid	50 000
Flunitrazepam	200	Morphin-3-β-Glucuronid	100 000
(±) Lorazepam	3 000	Morphin-6-β-Glucuronid	100 000
RS-Lorazepam glucuronid	200	Glucuronisaure	100 000
Midazolam	6 000	Ethanol	100 000
Nitrazepam	200	Methanol	100 000
Norchlordiazepoxid	100	<b>FENTANYL</b>	<b>FYL</b>
Nordiazepam	900	Afentanyl	600 000
<b>Oxazepam</b>	<b>300</b>	Fenfuramin	50 000
Temazepam	100	<b>LSD</b>	<b>LSD</b>
Triazolam	3 000	<b>Lysergsäure Diethylamid</b>	<b>20</b>
<b>KETAMIN</b>	<b>KET</b>	Fentanyl	100
Ketamin	1 000	Sufentanyl	50 000
Benzphetamine	25 000	LSD	<b>LSD</b>
(+) Chlorpheniramin	25 000	<b>ECSTASY</b>	<b>MDMA</b>
Clonidin	100 000	Lysergsäure Diethylamid	20
		Fentanyl	30
Dextromethorphan	2 000	(±) 3,4-Methylenedioxymethamphetamine HCl	500
Disopyramid	25 000		

EDDP	50 000	(±) 3,4-Methylenedioxyamphetamine HCl (MDA)	3,000
Mephentermin	25 000	3,4-Methylenedioxymethyl-amphetamine (MDE)	300
(1R,2S)-(-)-Ephedrin	100 000	<b>METHAMPHETAMIN</b>	<b>MET</b>
4-Hydroxyphenylcyclidin	50 000	p-Hydroxymethamphetamine	25 000
Levorphanol	50 000	<b>D-Methamphetamine</b>	<b>1 000</b>
MDE	50 000	L-Methamphetamine	20 000
Tetrahydrozolin	600	(±)-3,4-Methylenedioxymethamphetamine	12 500
d-Methamphetamine	50 000	Mephentermin	50 000
I-Methamphetamine	50 000	<b>MORPHIN</b>	<b>MOP</b>
Methoxyphenamin	25 000	Codein	200
(+)-3,4-Methylenedioxymethamphetamine	100 000	Ethylmorphin	6 000
d-Norpropyphen	25 000	Hydrocodon	50 000
Pentazocin	25 000	Hydromorphon	3 000
Phencyclidin	25 000	Levorphanol	1 500
Promazin	25 000	6-Monoacetylmorphin	300
Promethazin	25 000	Morphin 3-β-D-glucuronid	800
Thioridazin	50 000	<b>Morphin</b>	<b>300</b>
Meperidin	25 000	Norcodein	6 000
<b>METHADON</b>	<b>MTD</b>	Normorphon	50 000
<b>Methadon</b>	<b>300</b>	Oxycodon	30 000
Doxylamin	100 000	Oxymorphone	50 000
<b>OPIATE</b>	<b>OPI</b>	Procain	15 000
Codein	2 000	Thebain	6,000
Ethylmorphin	3 000	<b>TRIZYKLISCHE ANTIDEPRESSIVA</b>	<b>TCA</b>
Hydrocodon	50 000	Nortriptylin	1 000
Hydromorphon	15 000	Nordoxepin	500
Levorphanol	25 000	Trimipramin	3 000
6-Monoacetylmorphin	3 000	Amitriptylin	1 500
Morphin 3-β-D-glucuronid	2 000	Promazin	3 000
<b>Morphin</b>	<b>2 000</b>	Desipramin	200
Norcodein	25 000	Cyclobenzaprin	2 000
Normorphon	50 000	Imipramin	400
Oxycodon	25 000	Clomipramin	50 000
Oxymorphone	25 000	Doxepin	2 000
Procain	50 000	Maprotilin	2 000
Thebain	25 000	Promethazin	50 000
<b>CANNABIS</b>	<b>THC</b>	Perphenazin	50 000
Cannabinol	35 000	Dithiaden	10 000
11-nor- $\Delta^9$ -THC-9 COOH	30	<b>TRAMADOL</b>	<b>TRA</b>
11-nor- $\Delta^4$ -THC-9 COOH	50	n-Desmethyl-cis-tramadol	200
$\Delta^8$ -THC	17 000	<b>Cis-tramadol</b>	<b>100</b>
$\Delta^9$ -THC	17 000	Procyclidin	100 000
<b>SPICE</b>	<b>K2</b>	o-Desmethyl-cis-tramadol	10 000
JWH-018 5-Pentansäuremetabolit	50	Phencyclidin	100 000
JWH-073 4-Butansäuremetabolit	50	d,1-O-Desmethyl venlafaxin	50 000
JWH-018 4-Hydroxypentylmetabolit	400	<b>OXYCODONE</b>	<b>OXY</b>
JWH-018 5-Hydroxypentylmetabolit	500	Oxycodone	100
JWH-073 4-Hydroxybutylmetabolit	500	Oxymorphone	300
<b>ZOLPIDEM</b>	<b>ZOL</b>	Levorphanol	50 000
Zolpidem	50	Hydrocodone	25 000
<b>PROPOXYPHEN</b>	<b>PPX</b>	Hydromorphone	50 000
D-Propoxyphen	300	Naloxone	25 000
D-Norpropyphen	300	Naltrexone	25 000
<b>PHENCYCLIDIN</b>	<b>PCP</b>		
4-Hydroxyphencyclidin	12 500		
Phencyclidin	25		

#### KREUZREAKTIVITÄT

Eine Studie wurde durchgeführt, um die Kreuzreaktivität der Tests in drogenfreiem oder drogen-positivem Urin zu testen. Die folgenden Substanzen zeigen bei einer Konzentration von 100 µg/mL keine Kreuzreaktivität mit den „DIAQUICK“ Multi-Drogencassetten.

#### Nicht-kreuzreagierende Substanzen:

Acetophenetidin	Cortison	Zomepirac	d-Pseudoephedrin
N-Acetylprocainamid	Creatinin	Ketoprofen	Quinidin
Acetilsalicylsäure	Deoxycorticosteron	Labetalol	Quinin
Aminopyrin	Dextromethorphan	Loperamid	Salicysäure
Amoxicillin	Diclofenac	Meprobamat	Serotonin
Ampicillin	Difunisal	Methoxyphenamin	Sulfamethazin
Amilorid	Digoxin	Methylphenidat	Sulindac
Amoxycillin	Apomorphin	Nalidixinsäure	Tetracyclin
Aspartam	Diphenhydramin	Naproxen	Tetrahydrocortison
Atropin	Ethyl-p-aminobenzoat	β-Estradiol	Tetrahydrozolin
Benzilinsäure	Etron-3-sulfat	Estron-3-sulfat	Thiamin
Benzoeäsure	Erythromycin	Norethindron	Thiordazin
Bilirubin	Fenoprofen	Noscapin	d,I-Octopamin
Carbamidiol	Furosemid	Oxalsäure	d,L-Tyrosin
Coffein	Gentisinsäure	Oxolinsäure	Tolbutamid
Chloralhydrat	Haemoglobin	Oxymetazolin	Triamteren
Chloramphenicol	Hydralazin	Papaverin	Trifluoperazin
Chlorothiazid	Hydrochlorothiazid	Penicillin-G	Trimethoprim
d,I-Chlorpheniramin	Hydrocortison	Perphenazin	d,L-Tryptophan
Chlorpromazin	o-Hydroxyhippursäure	Phenelzin	Urinsäure
Cholesterol	3-Hydroxytyramin	Prednison	Verapamil
Chlorzimetin	d,I-Soproterenol	Isoxsuprin	d,I-Propanolol
Clonidin			

#### BIBLIOGRAPHIE

- Baselt, RC. Disposition of Toxic Drugs and Chemicals in Man. 2nd Ed. Biomedical Publ., Davis, CA. 1982; 488
- Tietz NW. Textbook of Clinical Chemistry. W.B. Saunders Company. 1986; 1735
- Hawks RL, CN Chang. Urine Testing for Drugs of Abuse. National Institute for Drug Abuse (NIDA), Research Monograph 73, 1986.



## “DIAQUICK” Painel de Multi-Drogas

para amostras de urina humana

### Multi-3 Painel de Teste

- REF Z06576CE Cont.: 30 testes, embalados individualmente (30x REF Z06576B)
- REF Z06576B Cont.: 1 test, embalado individualmente

### Multi-3/1 Painel de Teste

- REF Z09577CE Cont.: 30 testes, embalados individualmente (30x REF Z09577B)
- Cont.: 1 test, embalado individualmente

### Multi-4 Painel de Teste

- REF Z02575CE Cont.: 30 testes, embalados individualmente (30x REF Z02575B)
- REF Z02575B Cont.: 1 test, embalado individualmente

### Multi-5 Painel de Teste

- REF Z05236CE Cont.: 30 testes, embalados individualmente (30x REF Z05236B)
- REF Z05236B Cont.: 1 test, embalado individualmente

### Multi-5/3 Painel de Teste

- REF Z06502CE Cont.: 30 testes, embalados individualmente (30x REF Z06502B)
- REF Z06502B Cont.: 1 test, embalado individualmente

### Multi-5/4 Painel de Teste

- REF Z11504CE Cont.: 30 testes, embalados individualmente (30x REF Z11504B)
- REF Z11504B Cont.: 1 test, embalado individualmente

### Multi-5/6 Painel de Teste

- REF Z06506CE Cont.: 30 testes, embalados individualmente (30x REF Z06506B)
- REF Z06506B Cont.: 1 test, embalado individualmente

### Multi-6 Painel de Teste

- REF Z98907CE Cont.: 30 testes, embalados individualmente (30x REF Z98907B)
- REF Z98907B Cont.: 1 test, embalado individualmente

### Multi-6/1 Painel de Teste

- REF Z03220CE Cont.: 30 testes, embalados individualmente (30x REF Z03220B)
- REF Z03220B Cont.: 1 test, embalado individualmente

### Multi-6/3 Painel de Teste

- REF Z08930CE Cont.: 30 testes, embalados individualmente (30x REF Z08930B)
- REF Z08930B Cont.: 1 test, embalado individualmente

### Multi-6/4 Painel de Teste

- REF Z08940CE Cont.: 30 testes, embalados individualmente (30x REF Z08940B)
- REF Z08940B Cont.: 1 test, embalado individualmente

### Multi-6/6 Painel de Teste

- REF Z13960CE Cont.: 30 testes, embalados individualmente (30x REF Z13960B)
- REF Z13960B Cont.: 1 test, embalado individualmente

### Multi-6/7 Painel de Teste

- REF Z09970CE Cont.: 30 testes, embalados individualmente (30x REF Z09970B)
- REF Z09970B Cont.: 1 test, embalado individualmente

### Multi-6/10 Painel de Teste

- REF Z11911CE Cont.: 30 testes, embalados individualmente (30x REF Z11911B)
- REF Z11911B Cont.: 1 test, embalado individualmente

### Multi-7 Painel de Teste

- REF Z12730CE Cont.: 30 testes, embalados individualmente (30x REF Z12730B)
- REF Z12730B Cont.: 1 test, embalado individualmente

### Multi-10 Painel de Teste

- REF Z06230CE Cont.: 30 testes, embalados individualmente (30x REF Z04230B)
- REF Z04231CE Cont.: 10 testes, embalados individualmente (10x REF Z04230B)
- REF Z04230B Cont.: 1 test, embalado individualmente

### Multi-10/1 Painel de Teste

- REF Z06235CE Cont.: 30 testes, embalados individualmente (30x REF Z05235B)
- REF Z06236CE Cont.: 10 testes, embalados individualmente (10x REF Z05235B)
- REF Z05235B Cont.: 1 test, embalado individualmente

### Multi-10/2 Painel de Teste

- REF Z06102CE Cont.: 30 testes, embalados individualmente (30x REF Z06102B)
- REF Z06102B Cont.: 1 test, embalado individualmente

### Multi-10/3 Painel de Teste

- REF Z06103CE Cont.: 30 testes, embalados individualmente (30x REF Z06103B)
- REF Z06103B Cont.: 1 test, embalado individualmente

### Multi-10/4 Painel de Teste

- REF Z06104CE Cont.: 30 testes, embalados individualmente (30x REF Z06104B)
- REF Z06104B Cont.: 1 test, embalado individualmente

### Multi-10/5 Painel de Teste

- REF Z06105CE Cont.: 30 testes, embalados individualmente (30x REF Z06105B)
- REF Z06105B Cont.: 1 test, embalado individualmente

### Multi-10/6 Painel de Teste

- REF Z06106CE Cont.: 30 testes, embalados individualmente (30x REF Z06106B)
- REF Z06106B Cont.: 1 test, embalado individualmente

### Multi-10/7 Painel de Teste

- REF Z06107CE Cont.: 30 testes, embalados individualmente (30x REF Z06107B)
- REF Z06107B Cont.: 1 test, embalado individualmente

Todos os produtos contêm um manual de instruções!

Somente para diagnóstico in vitro. Somente para diagnóstico e monitorização terapêuticos. Somente para uso profissional.

### PARÂMETROS DO TESTE MULTI-DROGAS

O teste multi-drogas (DOA) é um imunoensaio cromatográfico de fluxo lateral para detecção qualitativa das seguintes drogas (veja os valores “cut-off” em baixo):

Parâmetro	Code	Calibrador	Cut-off
Anfetamina	AMP	d-Anfetamina	1 000 ng/mL
Barbitúricos	BAR	Secobarbital	300 ng/mL
Buprenorfina	BUP	Buprenorfina	10 ng/mL
Benzodiazepinas	BZO	Oxazepam	300 ng/mL
Cocaina	COC	Benzolecgonina	300 ng/mL
EDDP (Metabolito de metadona)	EDDP	2-Etileno-1,5-dimetil-3,3-difenilpirrolidina	300 ng/mL
Etilglucuronido	ETG	Etil-β-D-Glucuronido	500 ng/mL
Fentanil	FYL	Norfenantil	20 ng/mL
Ketamina	KET	Ketamina	1 000 ng/mL
LSD	LSD	Dietilamida do ácido lisérgico	20 ng/mL
Extasy	MDMA	(±)-4-Metilenodioximetanefetamina HCl	500 ng/mL
Metanfetamina	MET	d-Metanfetamina	1 000 ng/mL
Opiáceo, Morfina, Heroína	MOP	Morfina	300 ng/mL
Metadona	MTD	Metadona	300 ng/mL
Opiáceo, Morfina, Heroína	OPI	Morfina	2 000 ng/mL
Oxicodona	OXY	Oxicodona	100 ng/mL

Fenciclidina	PCP	Fenciclidina	25 ng/mL
Propoxifeno	PPX	d-Propoxifeno	300 ng/mL
Antidepressivos tricíclicos	TCA	Nortriptilina	1 000 ng/mL
Marijuana / Cannabis	THC	11-nor-A9-THC-9-COOH	50 ng/mL
Tramadol	TRA	cis-Tramadol	100 ng/mL
Marijuana sintética	K2	JWH-018 5-Ácido 5-pentanoico	50 ng/mL
Zolpidem	ZOL	Zolpidem	50 ng/mL

Este teste irá detectar outros componentes relacionados. Tenha como referência a tabela de especificações analíticas deste folheto. Este teste proporciona somente um resultado analítico preliminar. Um método químico alternativo mais específico deve ser usado de modo a obter uma confirmação do resultado analítico. O método da Cromatografia gasosa/Espectrometria de massa (GC/MS) foi estabelecido como o método de confirmação preferencial. Considerações clínicas e opiniões profissionais devem ser consideradas em qualquer resultado do teste de abuso de drogas, particularmente quando os testes preliminares indicam resultados positivos. Apenas para diagnóstico in vitro.

### PRINCÍPIO DE TESTE

O teste multi-drogas “DIAQUICK” (urina) é um imunoensaio baseado no princípio de ligação competitiva. As drogas que possam existir na amostra de urina competem com um conjugado de droga para locais de ligação do anticorpo. Durante o teste, a amostra de urina migra pela ação da capilaridade. Uma droga presente na urina a um nível inferior ao nível “cut-off”, não irá saturar os locais de ligação das partículas revestidas do anticorpo. As partículas revestidas de anticorpos serão posteriormente capturadas pelo conjugado imobilizado da droga e surgirá uma linha colorida na região de teste. Esta linha colorida não se formará na região de teste se o nível de droga for superior ao valor “cut-off” porque isso irá saturar todos os locais de ligação dos anticorpos. Uma amostra positiva de urina não irá gerar uma linha colorida na região de teste devido à competitividade da droga, enquanto que uma amostra negativa de urina ou uma amostra contendo uma concentração de droga inferior ao valor “cut-off” irá gerar uma linha na região de teste. Com o intuito de funcionar como procedimento de controlo, aparecerá sempre uma linha colorida na região de controlo, indicando que o volume adequado da amostra foi adicionado e absorvido pela membrana.

### PRECAUÇÕES

- Apenas para uso profissional em diagnóstico in-vitro. Não use depois da data de validade.
- Manter o teste na embalagem selada até à sua utilização.
- As amostras podem ser infeciosas; manuseie e descarte com cuidado e apropriadamente todos os dispositivos
- O teste usado deverá ser descartado num contentor apropriado para materiais infeciosos, de acordo com a legislação local.

### REAGENTES

O dispositivo de teste contém partículas revestidas com anticorpos monoclonais de rato e proteína conjugada com drogas. É utilizado um anticorpo de cabra no sistema da linha de controlo.

### ARMAZENAMENTO E ESTABILIDADE

O teste de multi-drogas Diaquick deve ser armazenado a 2-30°C na embalagem original. A data de validade indicada foi determinada sob condições normais de laboratório. O dispositivo pode ser armazenado à temperatura ambiente ou refrigerado (2-30°C). O dispositivo mantém-se estável até à data de validade impressa na bolsa selada. O dispositivo de teste deve ser mantido dentro da bolsa selada até à sua utilização. NÃO CONGELE. Não utilize após o prazo de validade.

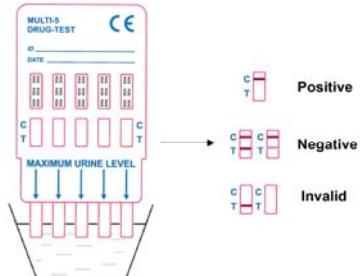
### COLHEITA DE AMOSTRA E PREPARAÇÃO

As amostras podem ser mantidas refrigeradas a 2-8°C até 48H antes do teste. Para uma conservação prolongada, as amostras deverão ser congeladas e mantidas abaixo dos -20°C. As amostras congeladas deverão ser descongeladas e homogeneizadas antes do teste.

### PROCEDIMENTO DE ENSAIO

Deixe o dispositivo de teste, amostra de urina e/ou controlo estabilizarem à temperatura ambiente (15-30°C).

1. Abra a embalagem pela ranhura e retire o teste. Utilize-o o mais rapidamente possível.
2. Retire a tampa protectora do painel de teste.
3. Com as setas a apontar para amostra de urina, mergulhe o painel verticalmente na urina por 10-15 segundos. Não deixe que a parte plástica do dispositivo entre em contacto com a urina quando introduz o dispositivo na amostra. Evite mergulhar a cassette mais do que até à marca de máximo indicada no dispositivo e evite qualquer contacto entre amostra e a região de teste.
4. Coloque o painel de teste numa superfície horizontal não absorvente, inicie o cronómetro e espere que as linha(s) colorida(s) apareçam. Leia o resultado após 5 minutos. Não interprete o resultado após 10 minutos.



### INTERPRETAÇÃO DOS RESULTADOS

**Negativo:** Uma linha colorida na região de controlo (C) e outra linha colorida na região de teste (T) indica um resultado negativo. Isto significa que a concentração de droga na amostra de urina está abaixo do valor “cut-off” para essa droga específica.

\*Nota: A intensidade da cor da linha da região de teste (T) varia, mas o teste deverá ser considerado negativo mesmo que a linha cor-de-rosa seja muito tênue.

**Positivo:** Se uma linha colorida aparece na região de controlo (C) mas não aparece uma linha na região de teste (T) é indicativo de um resultado positivo. Significa que a concentração da droga está acima do nível “cut-off” designado.

**Inválido:** A linha de controlo não aparece. Volume insuficiente de urina ou técnicas erradas de procedimento são as razões mais prováveis para a falha da linha na região de controlo. Revise o procedimento e repita o teste usando o dispositivo de teste novo. Se o problema persistir pare o uso e contacte o distribuidor local.

### CONTROLO DE QUALIDADE

Um procedimento de controlo foi incluído no teste. O aparecimento da linha vermelha na região de controlo (C) é considerado um procedimento interno de controlo. Confirma o volume suficiente da amostra, a absorção adequada da membrana e a técnica correcta de procedimento do teste. Não são fornecidos controlos padrão com este kit; de qualquer modo é recomendado que controlos negativos e positivos sejam realizados como boa prática laboratorial para confirmar o procedimento do teste e verificar o seu desempenho adequado.

### **RESTRICOES**

- O teste de abuso multi-drogas "DIAQUICK" (urina) providencia apenas um resultado analítico preliminar. Um segundo método analítico deverá ser utilizado para confirmação dos resultados. GC/MS é o método preferido para confirmação.
- Existe a possibilidade de factores tais como erros técnicos ou de procedimento, assim como outras substâncias nas amostras de urina possam interferir com o teste e causar resultados errados.
- Adulterantes, como descolorantes nas amostras de urina podem conduzir a resultados errados independentemente do método analítico utilizado. Se há suspeitas de adulterantes o teste deverá ser repetido com uma nova amostra de urina.
- Um resultado de teste positivo indica a presença da droga ou dos seus metabolitos, mas não fornece qualquer indicação quanto ao nível de intoxicação, rotina de administração ou concentração urinária.
- Um resultado negativo não indica necessariamente uma urina sem presença de droga. Estes resultados podem ser obtidos quando o nível de droga presente é inferior ao nível "cut-off" detectável pelo teste.
- O teste de abuso multi-drogas "DIAQUICK" (urina) não distingue drogas ilícitas de certos medicamentos.

### **CARACTERÍSTICAS DO TESTE**

#### **PRECISAO**

A precisão do teste de abuso multi-drogas "DIAQUICK" foi avaliada em comparação com testes rápidos comercialmente disponível. O teste foi realizado em cerca de 300 amostras. Os resultados presumivelmente positivos foram confirmados por GC/MS. Os resultados foram os seguintes.

% de acordo com o teste comercial

	Valores positivos	Valores negativos	Resultados totais
<b>TODOS</b>	>99%	>99%	>99%

% de acordo com GC/MS

	Valores positivos	Valores negativos	Resultados totais
<b>AMP</b>	98,1 %	97,9 %	98,0 %
<b>BAR</b>	96,1 %	98,6 %	97,6 %
<b>BUP</b>	99,1 %	> 99,9 %	99,6 %
<b>BZO</b>	98,4 %	99,2 %	98,8 %
<b>COC</b>	98,2 %	97,8 %	98,0 %
<b>EDDP</b>	97,9 %	99,4 %	98,8 %
<b>ETG</b>	97,6 %	99,4 %	98,8 %
<b>FYL</b>	98,8 %	99,4 %	99,2 %
<b>KET</b>	97,5 %	98,2 %	98,0 %
<b>LSD</b>	94,3 %	98,5 %	97,0 %
<b>MDMA</b>	98,1 %	99,3 %	98,8 %
<b>MET</b>	96,2 %	97,1 %	96,8 %
<b>MOP</b>	95,0 %	95,3 %	95,2 %
<b>MTD</b>	98,9 %	98,8 %	98,8 %
<b>OPI</b>	96,7 %	93,8 %	95,2 %
<b>OXY</b>	97,7 %	99,4 %	98,8 %
<b>PCP</b>	92,4 %	96,8 %	95,2 %
<b>PPX</b>	96,0 %	94,0 %	94,8 %
<b>TCA</b>	94,8 %	91,6 %	92,8 %
<b>THC</b>	97,9 %	98,1 %	98,0 %
<b>TRA</b>	88,2 %	92,4 %	90,8 %
<b>K2</b>	97,5 %	98,2 %	98,0 %
<b>ZOL</b>	90,9 %	97,1 %	95,6 %

### **ESPECIFICIDADE ANALÍTICA**

A tabela seguinte apresenta os componentes que são positivamente detectados na urina pelo teste de abuso multi-drogas (Diaquick) ao fim de 5 minutos.

<b>AMPHETAMINE</b>	<b>AMP</b>	<b>BARBITURATES</b>	<b>BAR</b>
D,L-Amphetamine sulfate	300	Amobarbital	5 000
L-Amphetamine	25 000	5,5-Diphenylhydantoin	8 000
(±) 3-Methylenedioxymphetamine	500	Allobarbital	600
Phentermine	800	Barbital	8 000
Maprotiline	50 000	Talbutal	200
Methoxyphenamine	6 000	Butalbital	8 000
D-Amphetamine	1 000	Phenobarbital	300
<b>BUPRENORPHINE</b>	<b>BUP</b>	Cyclopentobarbital	30 000
Buprenorphine	10	Pentobarbital	8 000
Norbutenorphine	50	Alphenol	600
Buprenorphine 3-D-Glucuronide	50	Aprobarbital	500
Norpurenorphine 3-D-Glucuronide	100	Butabarbital	200
<b>BENZODIAZEPINES</b>	<b>BZO</b>	Butethal	500
Alprazolam	100	<b>Secobarbital</b>	300
a-hydroxyalprazolam	1 500	<b>COCAINE</b>	<b>COC</b>
Bromazepam	900	Benzoyllecgonine	300
Chlordiazepoxide	900	Cocaine HCl	200
Clobazam	200	Cocaethylene	20 000
Clonazepam	500	Ecgognine HCl	30 000
Clorazepate dipotassium	500	<b>METHADONE METABOLITE</b>	<b>EDDP</b>
Delorazepam	900	2-Ethylidene-1,5-dimethyl-3-,3-diphenylpyrrolidine (EDDP)	300
Desalkylflurazepam	200	<b>ETHYGLUCURONIDE</b>	<b>ETG</b>
Diazepam	300	Ethyl-β-D-Glucuronide	500
Estazolam	6 000	Propyl-β-D-Glucuronide	50 000
Funitriazepam	200	Morphine-3-β-Glucuronide	100 000
(±) Lorazepam	3 000	Morphine-6-β-Glucuronide	100 000
RS-Lorazepam glucuronide	200	Gluconic Acid	100 000
Midazolam	6 000	Ethanol	100 000
Nitrazepam	200	Methanol	100 000
Norchlor diazepoxide	100	<b>FENTANYL</b>	<b>FYL</b>
Nordiazepam	900	Alfentanil	600 000
<b>Oxazepam</b>	<b>300</b>	Fenfluramine	50 000
Temazepam	100	<b>Norfentanyl</b>	<b>20</b>
Triazolam	3 000	Busporine	15 000
<b>KETAMINE</b>	<b>KET</b>	Fentanyl	100
Ketamine	1 000	Sufentanil	50 000
Benzphetamine	25 000	<b>LSD</b>	<b>LSD</b>
(+) Chlorpheniramine	25 000	Lysergic Acid Diethylamide	20
Clonidine	100 000	Fentanyl	30
Dextromethorphan	2 000	Sufentanil	50 000
Disopyramide	25 000	<b>ECSTASY</b>	<b>MDMA</b>
EDDP	50 000	(±) 3,4-Methylenedioxymphetamine HCl	500
Mephentermine	25 000	(±) 3,4-Methylenedioxymphetamine HCl (MDA)	3,000
(1R, 2S) - (-)-Ephedrine	100 000	3,4-Methylenedioxymethylamphetamine (MDE)	300
4-Hydroxyphencyclidine	50 000	<b>METHAMPHETAMINE</b>	<b>MET</b>

Levorphanol	50 000	p-Hydroxymethamphetamine	25 000
MDE	50 000	<b>D-Methamphetamine</b>	<b>1 000</b>
Tetrahydrozoline	500	L-Methamphetamine	20 000
d-Methamphetamine	50 000	(±)-3,4-Methylenedioxymethamphetamine	12 500
I-Methamphetamine	50 000	Mephentermine	50 000
Methoxyphenamine	25 000	<b>MORPHINE</b>	<b>MOP</b>
(+/-)3,4-Methylenedioxymethamphetamine	100 000	Codeine	200
d-Norpropyophenone	25 000	Ethylmorphine	6 000
Pentazocine	25 000	Hydrocodone	50 000
Phencyclidine	25 000	Hydromorphone	3 000
Promazine	25 000	Levorphanol	1 500
Promethazine	25 000	6-Monacetylmorphine	300
Thioridazine	50 000	Morphine 3-D-Glucuronide	800
Meperidine	25 000	<b>Morphine</b>	<b>300</b>
<b>METHADONE</b>	<b>MTD</b>	Norcodeine	6 000
<b>Methadone</b>	<b>300</b>	Normorphine	50 000
Doxylamine	100 000	Oxycodeone	30 000
<b>OPIATES</b>	<b>OPI</b>	Oxymorphone	50 000
Codeine	2 000	Procaine	15,000
Ethylmorphine	3 000	Thebaine	6,000
Hydrocodone	50 000	<b>TRICYCLIC ANTIDEPRESSANTS</b>	<b>TCA</b>
Hydromorphone	15 000	Nortriptyline	<b>1 000</b>
Levorphanol	25 000	Nordoxepine	500
6-Monacetylmorphine	3 000	Trimipramine	3 000
Morphine 3-β-D-glucuronide	2 000	Amitriptyline	1 500
<b>Morphine</b>	<b>2 000</b>	Promazine	3 000
Desipramine	200	Desipramine	200
Norcodeine	25 000	Cyclobenzaprine	2 000
Normorphine	50 000	Imipramine	400
Oxycodeone	25 000	Clomipramine	50 000
Oxymorphone	25 000	Doxepine	2 000
Procaine	50 000	Maprotiline	2 000
Thebaine	25 000	Promethazine	50 000
<b>CANNABIS</b>	<b>THC</b>	Perphenazine	50 000
Cannabinol	35 000	Dithiaden	10 000
11-nor- $\Delta^8$ -THC-9 COOH	30	<b>TRAMADOL</b>	<b>TRA</b>
11-nor- $\Delta^8$ -THC-9 COOH	50	n-Desmethyl-cis-tramadol	200
$\Delta^8$ -THC	17 000	<b>Cis-tramadol</b>	<b>100</b>
$\Delta^9$ -THC	17 000	Procyldidine	100 000
<b>SPICE</b>	<b>K2</b>	o-Desmethyl-cis-tramadol	10 000
JWH-018 5-Pentanoic acid metabolite	50	Phencyclidine	100 000
JWH-073 4-butanoic acid metabolite	50	d,l-O-Desmethyl venlafaxine	50 000
JWH-018 4-Hydroxypentyl metabolite	400	<b>OXYCODONE</b>	<b>OXY</b>
JWH-018 5-Hydroxypentyl metabolite	500	Oxycodone	100
JWH-073 4-Hydroxybutyl metabolite	500	Oxymorphone	300
<b>ZOLPIDEM</b>	<b>ZOL</b>	Levorphanol	50 000
Zolpidem	50	Hydrocodone	25 000
<b>PROPOXYPHENE</b>	<b>PPX</b>	Hydromorphone	50 000
D-Propoxyphene	300	Naloxone	25 000
D-Norpropyophenone	300	Naltrexone	25 000
<b>PHENCYCLIDINE</b>	<b>PCP</b>	4-Hydroxyphencyclidine	12 500
Phencyclidine	25	Phencyclidine	25

### **REACTIVIDADE CRUZADA**

Foi conduzido um estudo de modo a determinar a reactividade cruzada do teste com componentes tanto em urina sem drogas como em urina com drogas. Os seguintes componentes não apresentam qualquer interferência quando testados a uma concentração de 100 µg/mL.

### **Non Cross-Reactive Compounds:**

Acetophenetidin	Cortisone	Zomepirac	d-Pseudoephedrine
N-Acetylprocainamide	Creatinine	Ketoprofen	Quinidine
Acetyl salicylic acid	Deoxycorticosterone	Labetalol	Quinine
Aminopyrine	Dexamethasone	Loperamide	Salicylic acid
Amoxicillin	Diclofenac	Meprobamate	Serotonin
Ampicillin	Diflunisal	Methoxyphenamine	Sulfamethazine
I-Ascorbic acid	Digoxin	Methylphenidate	Sulindac
Apomorphine	Diphenhydramine	Nalidixic acid	Tetracycline
Aspartame	Ethyl-p-aminobenzoate	Naproxen	Tetrahydrocortisone,
Atropine	β-Estradiol	Niacinamide	3-acetate
Benzilic acid	Estrone-3-sulfate	Nifedipine	Tetrahydrocortisone
Benzoic acid	Erythromycin	Norethindrone	Tetrahydrozoline
Bilirubin	Fenoprofen	Noscapine	Thiamine
d,l-Brompheniramine	Eurosemide	l,d-Octopamine	Thioridazine
Caffeine	Gentisic acid	Oxalic acid	d,l-Tyrosine
Cannabidiol	Hemoglobin	Oxolinic acid	Tolbutamide
Chloral hydrate	Hydralazine	Oxymetazoline	Triamterene
Chloramphenicol	Hydrochlorothiazide	Papaverine	Trifluoperazine
Chlorothiazide	Hydrocortisone	Penicillin-G	Trimethoprim
d,l-Chlorpheniramine	o-Hydroxyhippuric acid	Perphenazine	d,l-Tryptophan
Chlorpromazine	3-Hydroxytyramine	Phenelzine	Uric acid
Cholesterol	d,l-Isoproterenol	Prednisone	Verapamil
Chlorotetracycline	Isoxsuprime	d,l-Propanolol	

### **REFERÉNCIAS**

- Baselt, RC. Disposition of Toxic Drugs and Chemicals in Man. 2nd Ed. Biomedical Publ., Davis, CA, 1982; 488
- Tietz NW. Textbook of Clinical Chemistry. W.B. Saunders Company. 1986; 1735
- Hawks RL, CN Chiang. Urine Testing for Drugs of Abuse. National Institute for Drug Abuse (NIDA), Research Monograph 73, 1986.

