

# SAMPLE DRUG SCREEN LAB REPORT

Lab Name  
Lab Address  
City, State Zip  
Telephone

## Drug Screen Results

*\*See Comment*

Date and time:  
Ordered by: (doctor name)

Collected:  
Approved by:

Specimen:  
Client ID:  
Client Name:  
Reference:  
Prescribed Drugs:

Date/Time	Test	Result
	PCP Scrn Ur QL	Negative (Normal)
	Opiate Scn Ur QL	Negative (Normal)
	Cocaine Scn Ur QL	Negative (Normal)
	Cannabinoids Ur QL	Negative (Normal)
	Benzodiazepines Ur QL	Negative (Normal)
	Barbituates Ur QL	Negative (Normal)
	Amph/Meth Scn Ur Q	Negative (Normal)

### Comment:

*This test is a drug screen. Any positive result is a presumptive positive result and should be followed by definitive confirmatory testing if clinically indicated. Results of this drug screen are to be used for medical purposes only. These results cannot be used for any non-medical purpose such as legal or employment testing. If confirmation of positive screen results is desired, please notify the laboratory within seven days.*

### Drug Screen Cutoff Concentrations:

Amphetamines 1000 ng/mL  
Barbiturates 200 ng/mL  
Benzodiazepines 200 ng/mL  
Cocaine 300 ng/mL  
Opiates 300 ng/mL  
PCP 25 ng/mL  
THC (Cannabinoids) 50 ng/mL  
Methadone 300 ng/mL  
Propoxyphene 300 ng/mL  
Oxycodone 100 ng/mL