§ 40.85 What drugs do laboratories test for?

As a laboratory, you must test for the following five drugs or classes of drugs in a DOT drug test. You must not test “DOT specimens” for any other drugs.

(a) Marijuana metabolites.
(b) Cocaine metabolites.
(c) Amphetamines.
(d) Opiate metabolites.
(e) Phencyclidine (PCP).

§ 40.87 What are the cutoff concentrations for drug tests?

(a) As a laboratory, you must use the cutoff concentrations displayed in the following table for initial and confirmatory drug tests. All cutoff concentrations are expressed in nanograms per milliliter (ng/mL). The table follows:

<table>
<thead>
<tr>
<th>Initial test analyte</th>
<th>Initial test cutoff concentration</th>
<th>Confirmatory test analyte</th>
<th>Confirmatory test cutoff concentration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marijuana metabolites .............</td>
<td>50 ng/mL</td>
<td>THCA ¹</td>
<td>15 ng/mL</td>
</tr>
<tr>
<td>Cocaine metabolites ...............</td>
<td>150 ng/mL</td>
<td>Benzoylcegonine ................</td>
<td>100 ng/mL</td>
</tr>
<tr>
<td>Opiate metabolites</td>
<td>2000 ng/mL</td>
<td>Codeine ......................</td>
<td>2000 ng/mL</td>
</tr>
<tr>
<td>Codeine/Morphine²</td>
<td></td>
<td>Morphine ........................</td>
<td>2000 ng/mL</td>
</tr>
<tr>
<td></td>
<td></td>
<td>6-Acetylmorphine .............</td>
<td>10 ng/mL</td>
</tr>
<tr>
<td>Phencyclidine ......................</td>
<td>25 ng/mL</td>
<td>Phenecyclidine ................</td>
<td>25 ng/mL</td>
</tr>
<tr>
<td>AMP/MAMP ⁴</td>
<td>500 ng/mL</td>
<td>Amphetamine ..................</td>
<td>250 ng/mL</td>
</tr>
<tr>
<td>MDMA ⁵</td>
<td>500 ng/mL</td>
<td>Methamphetamine ³</td>
<td>250 ng/mL</td>
</tr>
<tr>
<td></td>
<td></td>
<td>MDA ⁷</td>
<td>250 ng/mL</td>
</tr>
<tr>
<td></td>
<td></td>
<td>MDEA ⁸</td>
<td>250 ng/mL</td>
</tr>
</tbody>
</table>

¹ Delta-9-tetrahydrocannabinol-9-carboxylic acid (THCA).
² Morphine is the target analyte for codeine/morphine testing.
³ Either a single initial test kit or multiple initial test kits may be used provided the single test kit detects each target analyte independently at the specified cutoff.
⁴ Methamphetamine is the target analyte for amphetamine/methamphetamine testing.
⁵ To be reported positive for methamphetamine, a specimen must also contain amphetamine at a concentration equal to or greater than 100 ng/mL.
⁶ Methylenedioxymethamphetamine (MDMA).
⁷ Methylenedioxymamphetamine (MDA).
⁸ Methylenedioxyethylamphetamine (MDEA).

(b) On an initial drug test, you must report a result below the cutoff concentration as negative. If the result is at or above the cutoff concentration, you must conduct a confirmation test.

(c) On a confirmation drug test, you must report a result below the cutoff concentration as negative and a result at or above the cutoff concentration as confirmed positive.
(d) You must report quantitative values for morphine or codeine at 15,000 ng/mL or above.

§ 40.89 What is validity testing, and are laboratories required to conduct it?

(a) Specimen validity testing is the evaluation of the specimen to determine if it is consistent with normal human urine. The purpose of validity testing is to determine whether certain adulterants or foreign substances were added to the urine, if the urine was diluted, or if the specimen was substituted.

(b) As a laboratory, you must conduct validity testing.

§ 40.91 What validity tests must laboratories conduct on primary specimens?

As a laboratory, when you conduct validity testing under § 40.89, you must conduct it in accordance with the requirements of this section.

(a) You must determine the creatinine concentration on each primary specimen. You must also determine its specific gravity if you find the creatinine concentration to be less than 20 mg/dL.

(b) You must determine the pH of each primary specimen.

(c) You must perform one or more validity tests for oxidizing adulterants on each primary specimen.

(d) You must perform additional validity tests on the primary specimen when the following conditions are observed:

1. Abnormal physical characteristics;
2. Reactions or responses characteristic of an adulterant obtained during initial or confirmatory drug tests (e.g., non-recovery of internal standards, unusual response); or
3. Possible unidentified interfering substance or adulterant.

(e) If you determine that the specimen is invalid and HHS guidelines direct you to contact the MRO, you must contact the MRO and together decide if testing the primary specimen by another HHS certified laboratory would be useful in being able to report a positive or adulterated test result.

§ 40.93 What criteria do laboratories use to establish that a specimen is dilute or substituted?

(a) As a laboratory, you must consider the primary specimen to be dilute when:

1. The creatinine concentration is greater than or equal to 2 mg/dL but less than 20 mg/dL, and
2. The specific gravity is greater than 1.0010 but less than 1.0200 on a single aliquot.

(b) As a laboratory, you must consider the primary specimen to be substituted when the creatinine concentration is less than 2 mg/dL and the specific gravity is less than or equal to 1.0010 or greater than or equal to 1.0200 on both the initial and confirmatory creatinine tests and on both the initial and confirmatory specific gravity tests on two separate aliquots.

§ 40.95 What are the adulterant cutoff concentrations for initial and confirmation tests?

(a) As a laboratory, you must use the cutoff concentrations for the initial and confirmation adulterant testing as required by the HHS Mandatory Guidelines and you must use two separate aliquots—one for the initial test and another for the confirmation test.

(b) As a laboratory, you must report results at or above the cutoffs (or for pH, at or above or below the values, as appropriate) as adulterated and provide the numerical value that supports the adulterated result.

§ 40.96 What criteria do laboratories use to establish that a specimen is invalid?

(a) As a laboratory, you must use the invalid test result criteria for the initial and confirmation testing as required by the HHS Mandatory Guidelines, and you must use two separate