Section Two

Urine Toxicology

2.4 Liquid-Liquid Extraction Methods for Qualitative GC/MSD Confirmation 2.4.1 General Extraction of Urine for Basic and Neutral or Acidic and Neutral Compounds

2.4.1.1 BACKGROUND

These extraction procedures are extensions of the TOXI-LAB[®] TOXI-A and TOXI-B thin layer chromatography (TLC) drug detection systems. The samples are extracted as with the TLC system, however, instead of concentrating the extract onto a disc, the solvent extract is concentrated and placed into an automated liquid sampler (ALS) vial for analysis by a gas chromatograph equipped with a mass selective detector (GC/MSD). In 2013 the TOXI-LAB line was discontinued. An equivalent product De-Tox Tubes by Dyna-Tek were evaluated and found to be a suitable replacement.

2.4.1.2 SCOPE

This procedure describes the extraction of drug compounds from urine. Depending upon the pK_a of a drug compound, either De-Tox Tubes A or B (or equivalents) are used. Basic and neutral compounds are extracted with an A tube. Addition of urine to the De-Tox A tube results in the sample becoming alkaline and basic and neutral drugs thus extract into a solvent mixture. The B tube is used for acidic and neutral compounds. Urine placed into the De-Tox B tube becomes acidic resulting in acidic and neutral compounds being extracted into a solvent mixture. Either resulting extract is analyzed by full scan GC/MS in EI mode.

2.4.1.3

EQUIPMENT AND SUPPLIES

- 2.4.1.3.1 **T**ube Rocker
- 2.4.1.3.2 Solvent concentrator with appropriate concentration cups or tube
- 2.4.1.3.3 Laboratory Centrifuge
- 2.4.1.3.4 Automated Liquid Sampler (ALS) vials
- 2.4.1.3.5 GC/MS Vial Microinsert
- 2.4.1.3.6 Gas Chromatograph equipped with a mass selective detector and a low bleed (5%-Diphenyl-95%-Dimethylsiloxane copolymer) capillary column.

2.4.1.4 REAGENTS

De-Tox Tubes A and B (or equivalent Toxi Tubes)

2.4.1.5 **OUALITATIVE CONTROLS**

2.4.1.5.1 Positive control Tube A positive control may be commercially obtained or prepared in-house. At a minimum, the control must contain at least one phenethylamine at an approximate concentration between 500 and 3000 ng/mL and one opiate at an approximate concentration between 300 and 3000 ng/mL Tube B positive control may also be commercially obtained or prepared in-house. At a minimum, the control must contain two barbiturates at an approximate concentration between 300 and 1000 ng/mL. 2.4.1.5.3 Negative Urine

Negative urine can be commercially obtained or in-house urine verified to be negative for drugs of interest.

2.4.1.6 **QUALITATIVE NON-EXTRACTED REFERENCE MATERIAL**

- 2.4.1.6.1 Run necessary reference material as indicated by examination of GC/MSD data. Reference material mixes may be used.
- Dilute reference material as necessary. A suggested dilution 2.4.1.6.2 for a 1mg/mL solution is 1 in 3 parts of appropriate solvent.

2.4.1.7 **METHOD**

2.4.1.7.1De-Tox Tubes-A Extraction (Basic and Neutral Compounds) roperty of lorance Label DE-TOX TUBES A and ALS vials with 2.4.1.7.1.1microinserts for negative control, positive control and appropriate laboratory numbers.

- 2.4.1.7.1.2 Transfer \cong 5 mL of casework, negative and positive control urine to appropriate DE-TOX TUBE A (pH=9).
- 2.4.1.7.1.3 Rock DE-TOX TUBE A for at least 10 minutes.
- 2.4.1.7.1.4 Centrifuge tube at ≅2500-3000 rpm for $\cong 10$ minutes.
- 2.4.1.7.1.5 Transfer solvent and evaporate to $\cong 100$ -300µL.
- 2.4.1.7.1.6 Transfer solvent to labeled GC/MS ALS vial with microinsert.

	2.4.1.7.2	De-Tox Tu	bes-B Extraction (Acidic and Neutral
		<u>Compounds</u>) 2.4.1.7.2.1	Label DE-TOX TUBES B and ALS vials with microinserts for negative control, positive control and appropriate laboratory numbers.
		2.4.1.7.2.2	Transfer \cong 4.5 mL of casework, negative and positive control urine to appropriate DE-TOX TUBE B (pH=4.5).
		2.4.1.7.2.3	Rock DE-TOX TUBE B for at least 10 minutes.
		2.4.1.7.2.4	Centrifuge tube at \cong 2500-3000 rpm for \cong 10 minutes.
		2.4.1.7.2.5	Transfer solvent and evaporate to $\cong 100-300 \mu$ L.
		2.4.1.7.2.6	Transfer solvent to labeled GC/MS ALS vial with microinsert.
	2.4.1.7.3	<u>Preparation fo</u> 2.4.1.7.3.1	or Analysis Run Into Sequence log table, enter the sample case numbers, blanks and controls.
	floand	2.4.1.7.3.2	Load samples, reference materials, blank and controls into the quadrant rack as noted in the sequence table.
oerty	2.4.1.7.4	<u>GC-MSD An</u> 2.4.1.7.4.1	alysis Parameters Refer to instrument METHOD for current analysis parameters.
<i>S</i> ⁽⁰⁾	Or	2.4.1.7.4.2	Current analysis method must be stored centrally as a hard or electronic copy.
	2.4.1.7.5	Detection and The presence time for the s not differ by significant dif	<u>Identification Criteria</u> of a drug compound is indicated if the retention ample versus applicable reference material does 7 more than ± 0.2 minutes and there are no ferences in the mass spectral data.

2.4.1.8 QUALITY ASSURANCE REQUIREMENTS

2.4.1.8.1 Refer to toxicology analytical methods 5.8 and 5.10 for additional quality assurance and reference material authentication requirements.

2.4.1.9 ANALYSIS DOCUMENTATION

- 2.4.1.9.1 Original data for controls will be prepared for each analysis run and stored centrally in the laboratory where the analysis
- y with the second of the secon A copy of controls need not be included in individual case files. When necessary, a copy of control printouts can be

Revision History

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2.4 Liquid-Liquid Extraction Methods for Qualitative GC/MSD Confirmation 2.4.1 General Extraction of Urine for Basic and Neutral or Acidic and Neutral Compounds

Revision #	Issue Date	Revision
1	11-27-2001	Original Issue in SOP format
2	10-17-2002	Refinements
3	05-07-2007	Updated QA measures and reformatting.
4	07-28-2008	QA requirements clarified
5	12-16-2011	Added BRC3 as a positive control option, reduced concentration amount of extract from 200-300ul to 100-300ul. Clarified that centrifuge times and speeds are approximated. Changed tube rocking from 15 minutes to at least 10 minutes Changed centrifuge time from 15 minutes to about 10.
6 Oerty	09-06-2013	Replaced TOXI-Lab tubes with De-Tox tubes and allowed for equivalent tubes to be used, added additional options for positive controls.
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