

DRUGS OF ABUSE TESTING REQUEST FORM – SLAM
viapath

Client/sample Details		Specimen details	
SLAM Hospital Number:		Ward/Clinic/Hospital:	SLaM Cost Code:
Surname:		Consultant:	Toxicology Unit, King's College Hospital, London SE5 9RS T: 020 3299 5881, F: 020 3299 5888, E: kch-tr.toxicology@nhs.net
		Contact Tel. No:	
Forename:		Time and Date of Collection:	
		: hrs / /	
D.o.B: / /	Sex: M / F	Collected by:	

Reason for request:

Admission
Routine Monitoring
Suspicion

Test for (please tick as appropriate):

SLaM UDS package (includes opioids, amfetamines, benzodiazepines, cannabis, methadone, cocaine, buprenorphine, ketamine, tramadol and mephedrone tests)

Additional tests (can be requested individually):

Barbiturates (urine)*
Alcohol (ethanol)* – urine / blood (delete as appropriate)
Pregabalin (urine)*
Gabapentin (urine)*
Methylphenidate and metabolites (urine, includes ethylphenidate) *
Unknown substance screen (**powders/tablets only**)*

***Additional costs apply. Please contact the laboratory for further details**

RF-CB-TOX-UDSQ-SLAM v3

Form & container MUST both be uniquely identified with a minimum of Full Name, Date of Birth and Hospital Number

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