

Confidence in testing.

# Reditest<sup>®</sup> On-Site Oral

substance abuse screening device

Product Training  
Presentation





The information in this presentation is a general overview on using the Reditest<sup>®</sup> On-Site Oral substance abuse screening device.

### Product Training Contents:

- On-Site Oral overview
- Collection procedure
- Testing procedure
- Reading results
- Sending presumptive positives for confirmation

# On-Site Oral technical information

*It is important to read the package insert before using the On-Site Oral screening device.*

## **Screening Results:**

The On-Site Oral is used for **Screening Only**. Positive results obtained with this device are presumptive.

Additional testing is necessary to **confirm** the presumptive positive results. Positive results should be “confirmed” by an **alternate method such as GC/MS** (Gas Chromatography/Mass Spectrometry).

Professional judgment should be applied to any drug of abuse test result, particularly with preliminary positive results.

*The On-Site Oral screening device is a lateral flow chromatographic immunoassay for the qualitative detection of amphetamine, methamphetamine, cocaine, opiates, marijuana, phencyclidine and their metabolites in oral fluids. For forensic use only.*



## Product overview

# On-Site Oral product overview

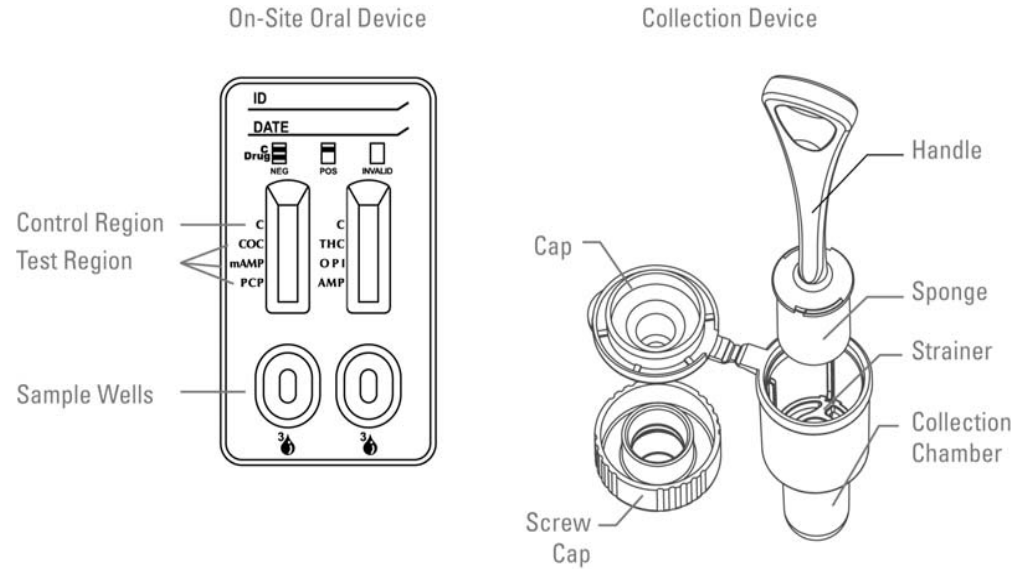


## FEATURES & BENEFITS

- Available tests include: \*AMP, M-AMP, THC, COC, OPI and PCP
- Eliminates the need for urine collection
- Eliminates controlled collection sites and their associated fees
- Provides a drug test without privacy issues
- Eliminates the need for same sex collectors, special equipment and complicated training
- Results in 10 minutes
- Can be used anywhere at any time

\* See page 8 for abbreviations and cut-off levels

# On-Site Oral components



**reditest.** On Site Oral / substance abuse screening device

**COLLECTION PROCEDURE**

1. Remove collector from foil pouch.
2. Insert sponge into mouth and swab inside for 3 minutes—until saturated.
3. Remove collector from mouth.
4. Flip open collection chamber cap (do not twist open cap at this time).
5. Place collector into chamber and press sponge fully against strainer. Snap cap shut on collection chamber.

**TESTING PROCEDURE**

1. To run test, twist open screw cap of the dropper tip assembly to expose dropper tip.
2. Invert collection chamber and transfer 3 drops of oral fluid into each sample well of the test device.
3. Place on flat surface. Wait for colored lines to appear.
4. Read results at 10 minutes. Do not read results after 1 hour.

For forensic use only  
Store at 2° - 30°C (36° - 86°F)

Redwood Toxicology Laboratory, Inc. assays provide only a preliminary result. Clinical consideration and professional judgment must be applied to any drug of abuse test result, particularly in evaluating a preliminary positive result. In order to obtain a confirmed analytical result, a more specific alternate chemical method is needed. Gas Chromatography/Mass Spectrometry (GC/MS) is the preferred confirmation method. (See package insert).

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Pouch

# On-Site Oral Packaging

Lot number, expiration date, part number and a list of abbreviated\* drugs screened on that specific On-Site Oral device are located on the back of the foil pouch.

**Pouch Back**

LIST OF DRUGS → AMP/M-AMP/THC/COC/OPI/PCP

PART NUMBER → P/N: 011020127

LOT NUMBER → Lot: DOAXXXXXXX Exp: 07/2010

EXPIRATION DATE →

**Pouch Front**

Oral / substance abuse screening device

Remove cap of the  
expose dropper tip.

and transfer 3  
ch sample well

it for colored

s. Do not read

Positive  
for COC  
mAMP PCP  
OPI

Negative

Invalid  
No control line

For forensic use only.  
Store at 2° - 30°C (36° - 86°F)

Redwood Toxicology Laboratory, Inc. assays provide only a preliminary result. Clinical consideration and professional judgement must be applied to any drug of abuse test result, particularly in evaluating a preliminary positive result. In order to obtain a confirmed analytical result, a more specific alternate chemical method is needed. Gas Chromatography/Mass Spectrometry (GC/MS) is the preferred confirmation method. (See package insert).

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\* See page 8 for abbreviations and cut-off levels

# On-Site Oral cut-off levels

DRUG	TARGET DRUG	CUT-OFF
<b>Amphetamine (AMP)</b>	D-Amphetamine	50 ng/mL
<b>Cocaine (COC)</b>	Benzoylcegonine	20 ng/mL
<b>Marijuana (THC)</b>	11-nor- $\Delta^9$ -THC-9 COOH	12 ng/mL
<b>Methamphetamine (M-AMP)</b>	D-Methamphetamine	50 ng/mL
<b>Opiates (OPI)</b>	Morphine	40 ng/mL
<b>Phencyclidine (PCP)</b>	Phencyclidine	10 ng/mL

# Drug detection times

Drug	Detection Time
Amphetamine (AMP) Cocaine (COC) Methamphetamine (M-AMP) Opiates (OPI) Phencyclidine (PCP)	<u>Approximately up to 48 hours</u>

Drug	Detection Time
Marijuana (THC)	<u>Approximately up to 24 hours</u>



## Collection procedure

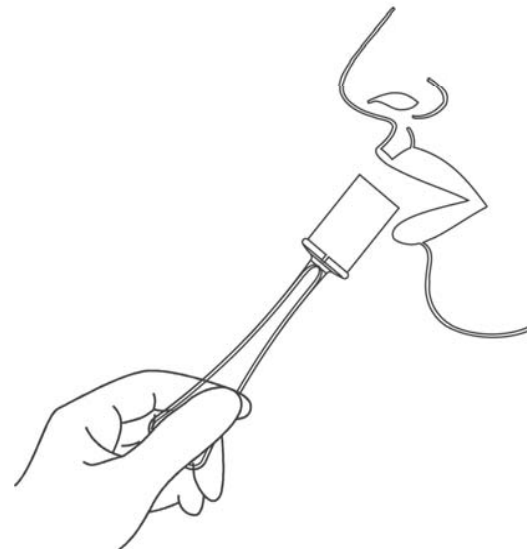
# Collecting specimen

Remove the collector from the sealed pouch.



**Remove collection device**

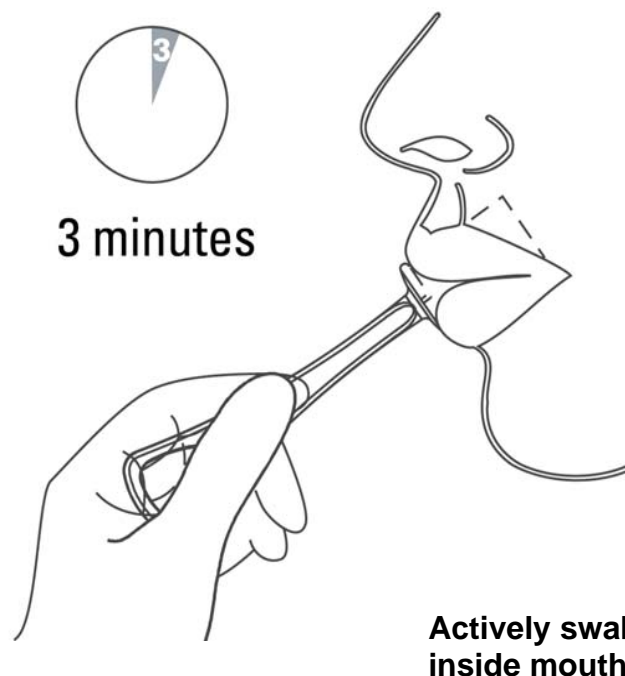
Insert the sponge end of the collector into the mouth.



# Collecting specimen

Actively swab the inside of the mouth and tongue to collect oral fluid for a total of **3 minutes** until the sponge becomes fully saturated.

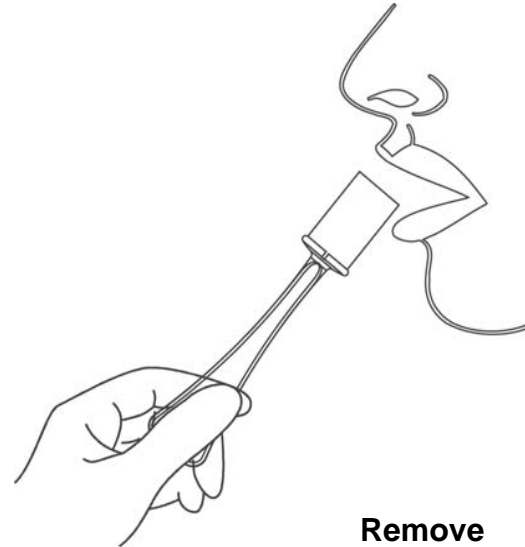
**Gently pressing the sponge between the tongue and teeth will assist saturation.**  
No hard spots should be felt on the sponge when saturated.



# Collecting specimen

Remove collector from mouth.

NOTE: The device may be left in the mouth longer than 3 minutes to “fully saturate” the sponge.



**Remove  
collector after  
3 minutes**

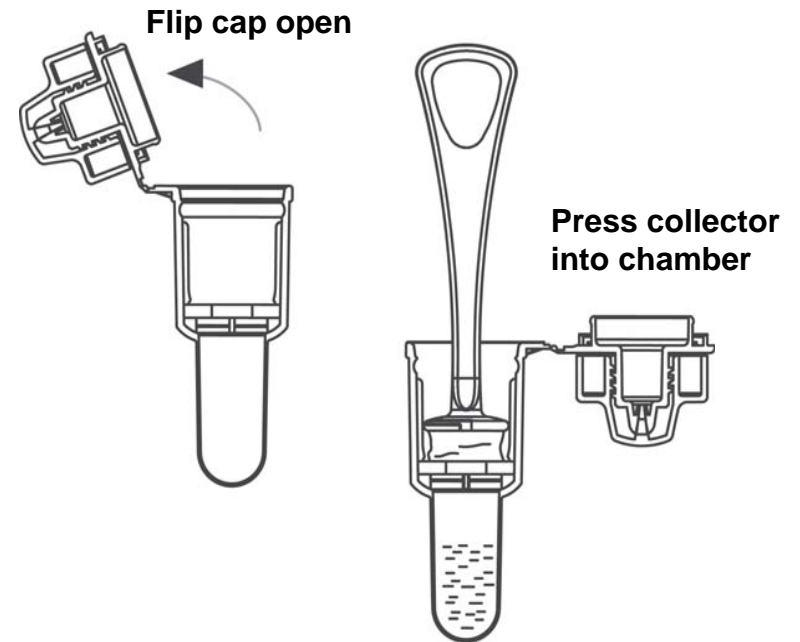


# Testing procedure

# Testing procedure

Flip open the cap of the collection chamber (**do not twist open the cap of the collection chamber at this time**).

Place saturated oral fluid collector into chamber and press sponge fully against strainer to collect oral fluid. **Discard collector**. Snap the cap shut on the collection chamber.

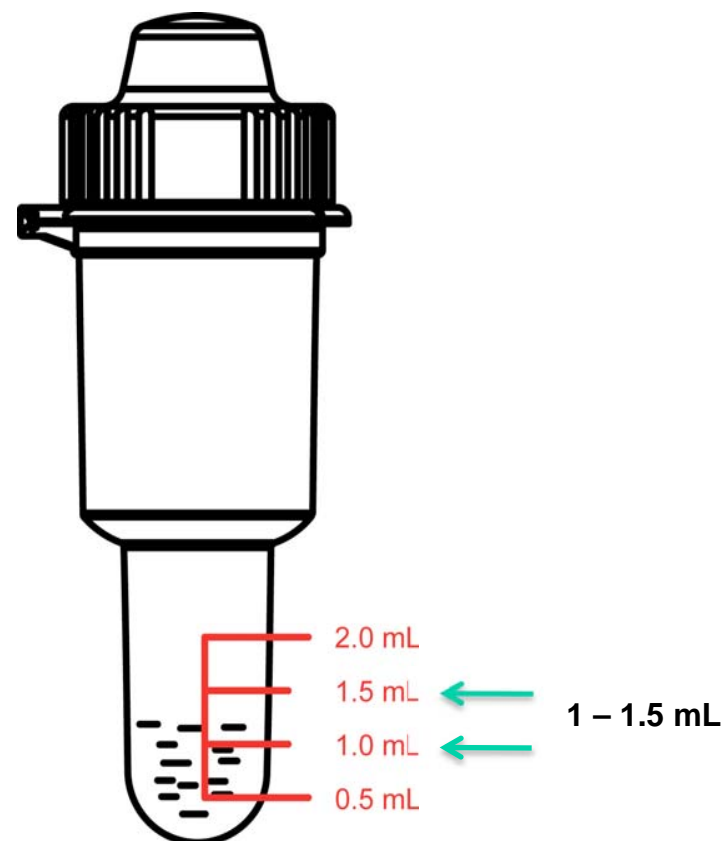


# Testing procedure

Optimum amount of oral fluid to collect is between:

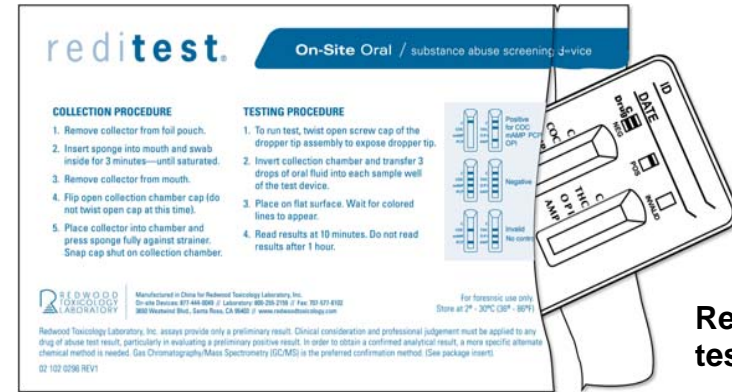
**1 – 1.5 mL**

This helps ensure proper specimen volume for initial test and possible confirmation tests.



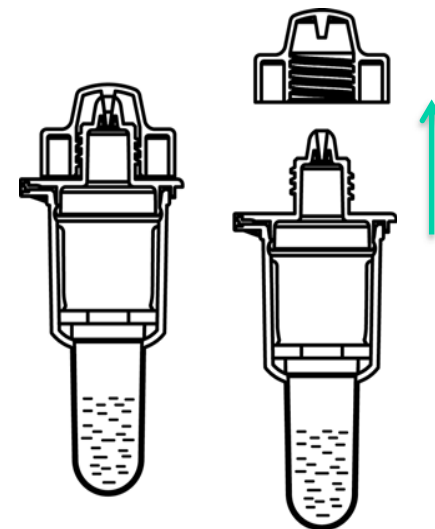
# Testing procedure

Open the foil pouch and remove the On-Site Oral device.



Remove test cassette

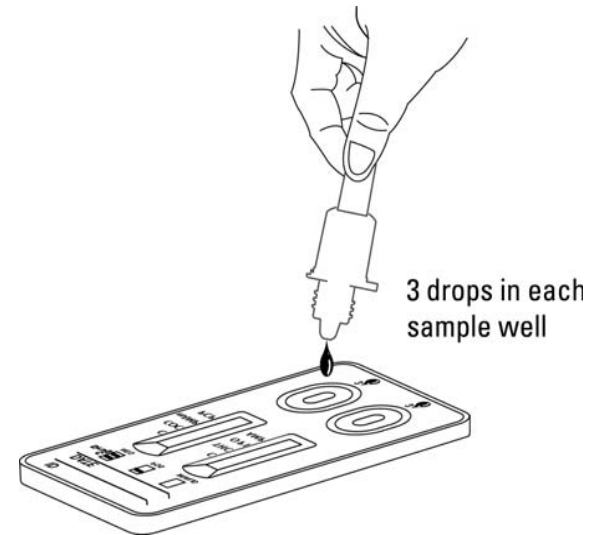
To run the test, twist open the screw cap of the dropper tip assembly to expose dropper tip.



Remove cap to expose dropper tip

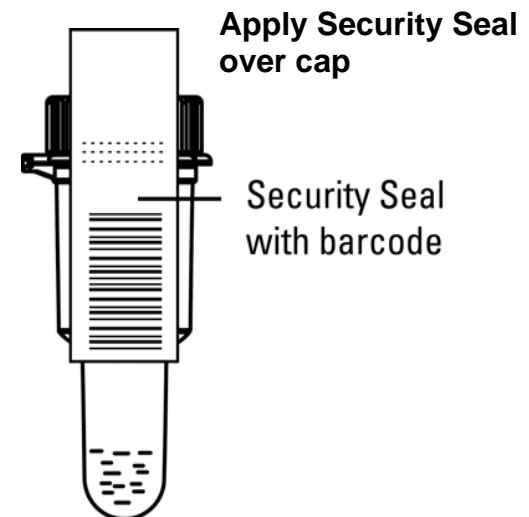
# Testing procedure

Invert the collection chamber and transfer **3 drops** of oral fluid into each sample well of the test device.



Place screw cap back onto collection chamber with remaining oral fluid. To prevent leakage, make sure the lid is threaded properly and tightly fastened.

**Apply security seal over screw cap.**  
Security Seals are provided with the test devices.

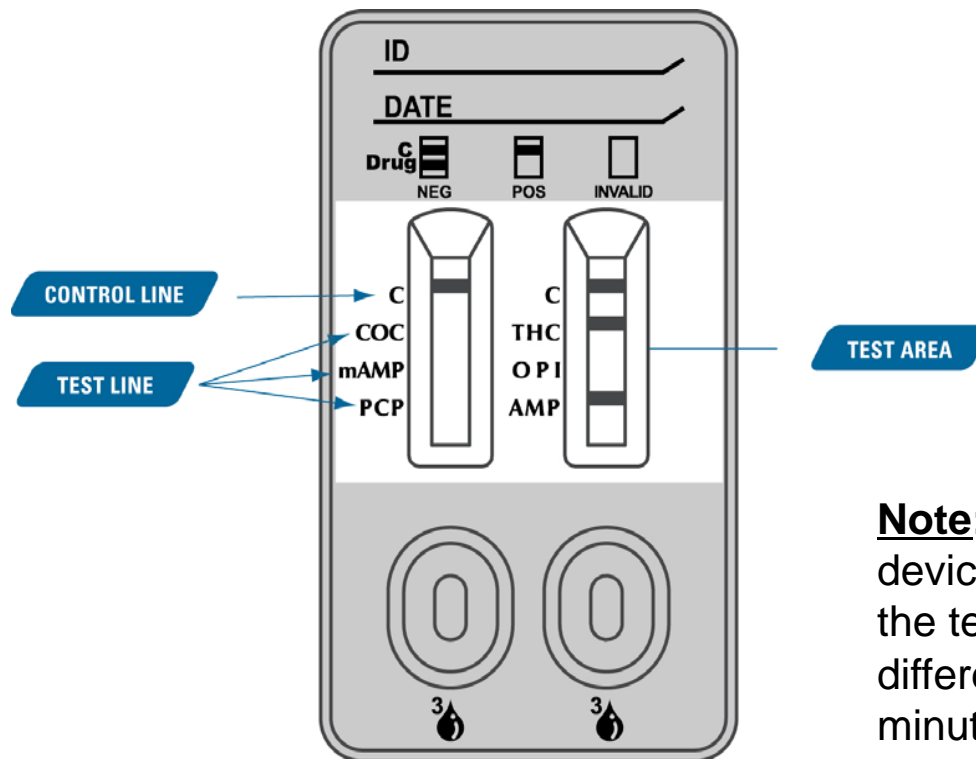




## Reading results

# Reading results

Wait for colored lines to appear. Read test results at **10 minutes**. Do not interpret results after 1 hour as false results may occur. **NOTE:** Any line at all in the test area is to be interpreted as negative.



**Note:** As oral fluid wicks up the test device a “pink” color may be seen in the test area. Lines will develop at different rates. Wait the entire 10 minutes before reading results.

# Result interpretation

## NEGATIVE

The control line must be red to indicate the test is valid. Any visible line, even a faint line, indicates a negative result. *See example page 22.*

## NEGATIVE RESULT

CTL 

DRUG 

---

## POSITIVE

The control line must be red to indicate the test is valid. The test area must be snow white to be considered positive. *See example page 23.*

## POSITIVE RESULT

CTL 

DRUG 

---

## INVALID

When there is no line in the control line area, the result is invalid. If an invalid result is obtained repeat the test using a new test device.

## INVALID RESULT

CTL 

DRUG 

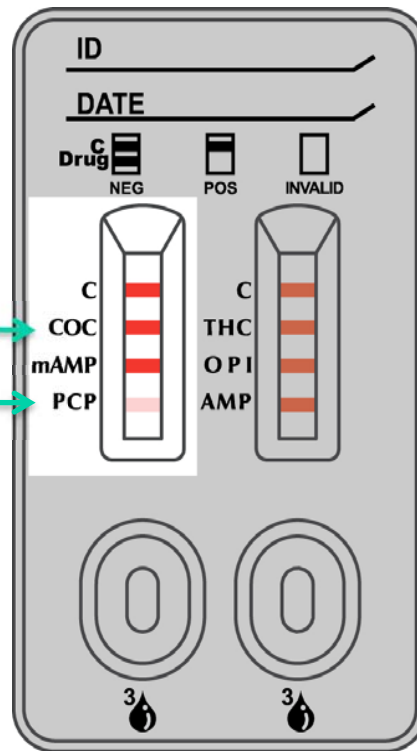
If the problem persists, contact RTL Client Services at:  
**(800) 255-2159, ext. 4399**

# Reading results

## *Negative Example*

**NEGATIVE** = line is present

Any visible line, even a faint line, indicates a negative result.

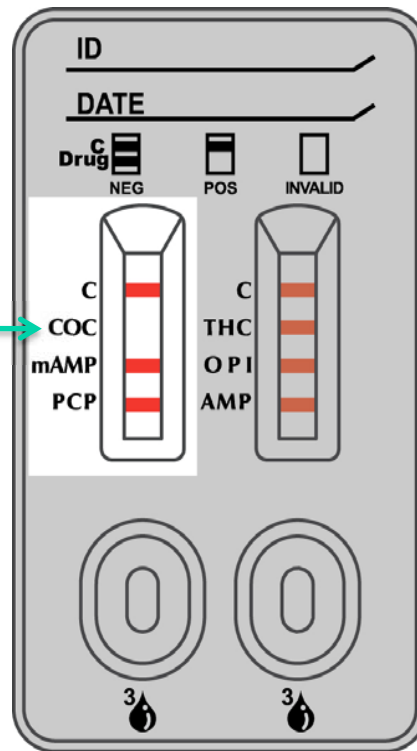


# Reading results

## *Presumptive Positive Example*

**POSITIVE** = line is not present

Presumptive positive for cocaine (no line is present).

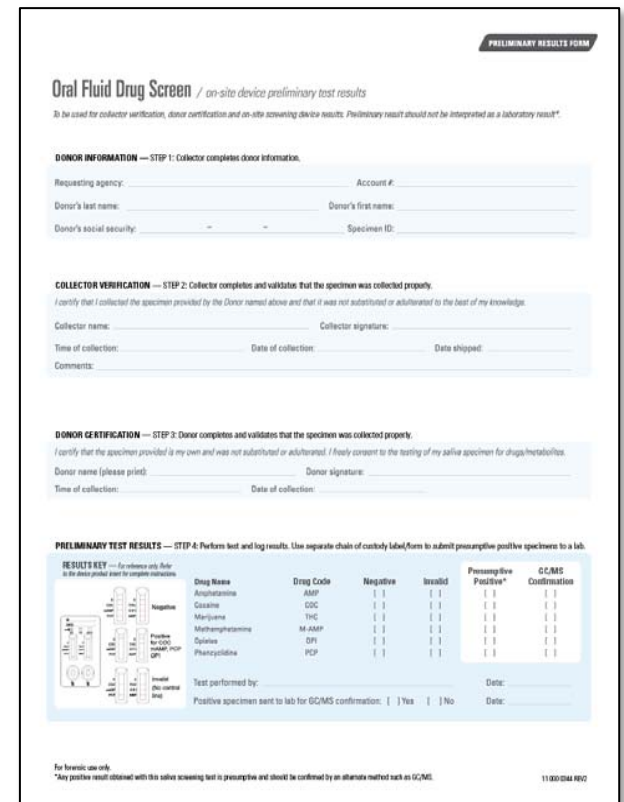


# Logging on-site test results

Use a **Preliminary Result Form** to log on-site drug test results. Printed forms are available by request. A PDF form can also be downloaded from our website at: [www.redwoodtoxicology.com/documents/products/urine-prelim\\_result\\_form.pdf](http://www.redwoodtoxicology.com/documents/products/urine-prelim_result_form.pdf)

Forms are for your internal use. These forms are not lab test request forms (for further confirmation testing). Please use the Lab Test Requisition Forms provided by your laboratory for confirmation testing.

*Redwood Toxicology Laboratory provides confirmation testing for many Reditest® on-site screening devices. For more information about this service, call (800) 255-2159.*



**PRELIMINARY RESULTS FORM**

**Oral Fluid Drug Screen** / on-site device preliminary test results

*To be used for collector verification, donor certification and on-site screening device results. Preliminary result should not be interpreted as a laboratory result.\**

**DONOR INFORMATION — STEP 1: Collector completes donor information.**

Requesting agency: \_\_\_\_\_ Account #: \_\_\_\_\_  
Donor's last name: \_\_\_\_\_ Donor's first name: \_\_\_\_\_  
Donor's social security: - - - - - Specimen ID: \_\_\_\_\_

**COLLECTOR VERIFICATION — STEP 2: Collector completes and validates that the specimen was collected properly.**

*I certify that I collected the specimen provided by the Donor named above and that it was not substituted or adulterated to the best of my knowledge.*

Collector name: \_\_\_\_\_ Collector signature: \_\_\_\_\_  
Time of collection: \_\_\_\_\_ Date of collection: \_\_\_\_\_ Date shipped: \_\_\_\_\_  
Comments: \_\_\_\_\_

**DONOR CERTIFICATION — STEP 3: Donor completes and validates that the specimen was collected properly.**

*I certify that the specimen provided is my own and was not substituted or adulterated. I freely consent to the testing of my saliva specimen for drugs/herbals.*

Donor name (please print): \_\_\_\_\_ Donor signature: \_\_\_\_\_  
Time of collection: \_\_\_\_\_ Date of collection: \_\_\_\_\_

**PRELIMINARY TEST RESULTS — STEP 4: Perform test and log results. Use separate chain of custody label/form to submit presumptive positive specimens to a lab.**


**RESULTS KEY —** For reference only. Refer to the device packet insert for complete instructions.

Drug Name	Drug Code	Negative	Invalid	Presumptive Positive*	GC/MS Confirmation
Amphetamine	AMP				
Cocaine	COC				
Marijuana	TMC				
Methamphetamine	M-AMP				
Opioids	OPI				
Phencyclidine	PCP				

Test performed by: \_\_\_\_\_ Date: \_\_\_\_\_  
Positive specimen sent to lab for GC/MS confirmation: ( ) Yes ( ) No Date: \_\_\_\_\_

For forensic use only.  
\*Any positive result obtained with this saliva screening test is presumptive and should be confirmed by an alternate method such as GC/MS.

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# Shipping specimens to the laboratory

# Shipping specimens



For instruction on how to send presumptive positive specimens to the lab, please view the next document in the training series: **“Specimen Labeling & Shipping”**.

View online here:

[www.redwoodtoxicology.com/resources/documents/labeling\\_shipping.pdf](http://www.redwoodtoxicology.com/resources/documents/labeling_shipping.pdf)



*If you have additional questions about your device please  
contact  
a Sales or Client Services representative:*

**Redwood Toxicology Laboratory, Inc.**

***Reditest® Screening Devices***

3650 Westwind Blvd.

Santa Rosa, CA 95403

[www.redwoodtoxicology.com](http://www.redwoodtoxicology.com)

Sales Inquiries **(800) 255-2159** or 877-444-0049

Client Services **(800) 255-2159, ext. 4399** or 707-577-7959, ext. 4339

Confidence in testing.

Thank you for your time.



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