

# CEDIA® Oxycodone OFT Assay

Thermo  
SCIENTIFIC

For Criminal Justice and Forensic Use Only  
(For Use with Oral-Eze® Oral Fluid Collection System)

**REF** 10022351 (65 mL Kit)

## Intended Use

The Thermo Scientific CEDIA® Oxycodone OFT Assay is intended for use in the qualitative determination of oxycodone in human oral fluid at a cutoff concentration of 30 ng/mL in neat oral fluid. The assay is calibrated against oxycodone and is performed on clinical chemistry analyzers. The assay must be used with the CEDIA Multi-Drug OFT Calibrators and Control Set B. The oral fluid specimen must be collected exclusively with the Oral-Eze® Oral Fluid Collection System. This device is not intended for use for clinical diagnostic applications.

**The CEDIA Oxycodone OFT Assay provides only a preliminary analytical test result. A more specific alternative method must be used to obtain a confirmed analytical result. Gas Chromatography/Mass Spectrometry (GC/MS) and Liquid Chromatography-Tandem Mass Spectrometry (LC-MS/MS) are the preferred confirmatory methods. Clinical consideration and professional judgment should be applied to any drug of abuse test result particularly when preliminary positive results are used.**

## Summary and Explanation of the Test

Oxycodone is a semi-synthetic opioid prescribed for pain management in patients with moderate to severe pain. It is similar to codeine and morphine in its analgesic properties but it is more potent than morphine and has higher dependence potential. The drug oxycodone is supplied as OxyContin® (Oxycodone HCl) or in combination with aspirin (Percodan®) or acetaminophen (Percocet®).<sup>(1)</sup> Drug abusers crush the pills into powder and snort them for faster effect which may result in a potentially fatal outcome. According to Drug Abuse Warning Network (DAWN), there has been a dramatic increase in oxycodone related deaths.<sup>(2,3)</sup> Oxymorphone, noroxycodone and noroxymorphone are the only known metabolites of oxycodone.<sup>(2)</sup> The metabolite, oxymorphone, is a potent narcotic analgesic, while the other two metabolites are relatively inactive.

The CEDIA Oxycodone OFT Assay uses recombinant DNA technology to produce a unique homogeneous enzyme immunoassay system.<sup>(5)</sup> The assay is based on the bacterial enzyme  $\beta$ -galactosidase, which has been genetically engineered into two inactive fragments. These fragments spontaneously re-associate to form fully active enzyme that, in the assay format, cleaves a substrate, generating a color change that can be measured spectrophotometrically.

In the assay, analyte in the sample competes with analyte conjugated to one inactive fragment (enzyme donor) of  $\beta$ -galactosidase for antibody binding site. If analyte is present in the sample, it binds to antibody, leaving the inactive enzyme fragment free to form active enzyme. If the analyte is not present in the sample, antibody binds to analyte conjugated on the inactive fragment, inhibiting the re-association of inactive  $\beta$ -galactosidase fragments, and no active enzyme is formed. The amount of active enzyme formed and resultant absorbance change are directly proportional to the amount of analyte present in the sample.

## Reagents

- 1 EA Reconstitution Buffer**  
Contains buffer salts, mouse monoclonal anti-Oxycodone derivative antibody 0.25-2.5 mg/L, stabilizer and preservative.
- 1a EA Reagent**  
Contains 0.171 g/L Enzyme Acceptor (*Escherichia coli*), buffer salts and preservative.
- 2 ED Reconstitution Buffer**  
Contains buffer salts, stabilizers and preservative.
- 2a ED Reagent**  
Contains 0.4 mg/L Enzyme Donor (*Escherichia coli*) conjugated to Oxycodone derivative, 1.67 g/L chlorophenol red- $\beta$ -D-galactopyranoside, stabilizers, detergent and preservative.

## Additional Materials Required (sold separately)

REF	Kit Description
10014954	CEDIA Multi-Drug OFT Negative Calibrator
10022355	CEDIA Multi-Drug OFT Cutoff Calibrator Set B
10022356	CEDIA Multi-Drug OFT Control Set B
96100-050	Oral-Eze Oral Fluid Collection Device (50/Box)
96100-500	Oral-Eze Oral Fluid Collection Device (500/Box)
96105-050	Oral-Eze Oral Fluid Sample Extractor (50/Box)
96105-500	Oral-Eze Oral Fluid Sample Extractor (500/Box)

## Precautions and Warning

The test is for Criminal Justice and Forensic use only. The reagents are harmful if swallowed. Do not use the reagents beyond their expiration dates.

**DANGER:** The powder reagents contain  $\leq 55\%$  w/w Bovine Serum Albumin (BSA) and  $\leq 1\%$  w/w Sodium Azide. Liquid reagents contain  $\leq 0.5\%$  Bovine Serum,  $\leq 0.2\%$  Sodium Azide, and  $\leq 0.1\%$  Drug-Specific Antibody (Mouse).

H317 - May cause allergic skin reaction.

H334 - May cause allergy or asthma symptoms or breathing difficulties if inhaled.

EUH032 - Contact with acids liberates very toxic gas.

Avoid breathing mist or vapor. Contaminated work clothing should not be allowed out of the workplace. Wear protective gloves/eye protection/face protection. In case of inadequate ventilation wear respiratory protection. If on skin: Wash with plenty of soap and water. IF INHALED: If breathing is difficult, remove victim to fresh air and keep at rest in a position comfortable for breathing. If skin irritation or rash occurs: Get medical advice/attention. If experiencing respiratory symptoms: Call a POISON CENTER or doctor/physician. Wash contaminated clothing before reuse. Dispose of contents/container to location in accordance with local/regional/national/international regulations.

In the case of accidental spill, clean and dispose of material according to your laboratory's SOP, local, and state regulations.

In the case of damaged packaging on arrival, contact your technical support representative (refer to back page of this Package Insert).

## Reagent Preparation and Storage

For preparation of the solutions, refer to the section below. Remove the kit from refrigerated storage (2-8°C) immediately prior to preparation of the solutions.

Prepare the solutions in the following order to minimize possible contamination.

### R2 Enzyme Donor Solution

Connect Bottle 2a (ED reagent) to Bottle 2 (ED Reconstitution Buffer) using one of the enclosed adapters. Mix by gentle inversion, ensuring that all the lyophilized material from Bottle 2a is transferred into Bottle 2. Avoid the formation of foam. Detach Bottle 2a and adapter from Bottle 2 and discard. Cap Bottle 2 and let stand approximately 5 minutes at room temperature (21-25°C). Mix again. Record the reconstitution date on the bottle label. Place the bottle directly into the reagent compartment of the analyzer or into refrigerated storage (2-8°C) and let stand for 30 minutes before use.

### R1 Enzyme Acceptor Solution

Connect Bottle 1a (EA reagent) to Bottle 1 (EA Reconstitution Buffer) using one of the enclosed adapters. Mix by gentle inversion, ensuring that all the lyophilized material from Bottle 1a is transferred into Bottle 1. Avoid the formation of foam. Detach Bottle 1a and adapter from Bottle 1 and discard. Cap Bottle 1 and let stand approximately 5 minutes at room temperature (21-25°C). Mix again. Record the reconstitution date on the bottle label. Place the bottle directly into the reagent compartment of the analyzer or into refrigerated storage (2-8°C) and let stand for 30 minutes before use.

**NOTE 1:** The components supplied in this kit are intended for use as an integral unit. Do not mix components from different lots.

**NOTE 2:** Avoid cross-contamination of reagents by matching reagent caps to the proper reagent bottle. The R2 solution (Enzyme Donor) should be yellow-orange in color. A red or red-purple color indicates that the reagent has been contaminated and must be discarded.

**NOTE 3:** The R1 and R2 solutions must be at the reagent compartment storage temperature of the analyzer before performing the assay. Refer to the analyzer specific application sheet for additional information.

Store reagents at 2-8°C. **DO NOT FREEZE.** For shelf life of the unopened components, refer to the box or bottle labels for the expiration date.

**R1 Solution:** 60 days refrigerated on analyzer or at 2-8°C.

**R2 Solution:** 60 days refrigerated on analyzer or at 2-8°C.

## Specimen Collection and Handling

Oral fluid samples are suitable for use in the CEDIA Oxycodone OFT Assay. Collect oral fluid samples using the Oral-Eze Oral Fluid Collection System. Care should be taken to preserve the chemical integrity of the oral fluid sample from the time it is collected until the time it is assayed by securely capping the samples, storing the samples at 2-8°C or at room temperature (21-25°C), and testing within 21 days after collection.

**NOTE:** Handle oral fluid samples as if they were potentially infectious.

Samples within a pH range of 5-9 are suitable for testing with this assay.

### Oral-Eze Sample Processing Procedure

1. Label the sample collection vial with proper identification.
2. Check the sample collection date on the vial to ensure that the sample is within 21 days from the date of collection.
3. Open the cap and compress the pad to express the sample.
4. Recap the vial and the sample is ready for testing.
5. Ensure that the oral fluid samples are maintained between 4°C and 37°C during shipping.
6. Samples can be stored at room temperature (21-25°C) for 21 days. They should be stored at 2-8°C.

### Assay Procedure

The Oral-Eze Oral Fluid Collection Device contains a preservative buffer that dilutes the neat oral fluid sample. The calibrator and control levels are set at diluted levels so that sample absorbance values can be compared directly to the absorbance value of the cutoff calibrator. The assay result is reported as a positive or negative result relative to the neat oral fluid cutoff of 30 ng/mL. The concentrations reported in this insert refer to the neat oral fluid concentration, unless otherwise noted.

**NOTE:** To correlate the Oral-Eze result from the assay or the associated LC-MS/MS confirmation result to a neat oral fluid value, the result from the Oral-Eze sample should be multiplied by a factor of 3.

1. Pipet the processed oral fluid samples, calibrators, and controls into labeled cups and place the cups onto the analyzer.
2. Load reagents (reagent 1 and reagent 2) into the reagent compartment of the analyzer.
3. Program the run setup using 570 nm as a primary wavelength and 660 nm as the secondary wavelength. Refer to the parameter sheet for detailed instructions on how to program the analyzer.
4. Use the cutoff calibrator as a reference for distinguishing negative from positive samples.

### Quality Control

The CEDIA Multi-Drug OFT Control Set B is designed to be used with the CEDIA Oxycodone OFT Assay. Good laboratory practice suggests the use of control specimens to ensure proper assay performance. Ensure that control results are within the established ranges determined by laboratory practices and guidelines. If control results fall outside of established ranges, assay results are invalid. All quality control requirements should be performed in conformance with local, state, and/or federal regulations or accreditation requirements.

### Interpretation of Results

A sample that exhibits a change in absorbance ( $\Delta A$ ) value equal to or greater than the value obtained with the cutoff calibrator is considered positive. A sample that exhibits a change in absorbance ( $\Delta A$ ) value lower than the value obtained with the cutoff calibrator is considered negative.

### Drug Recovery

Recovery of drugs from the collection pad using the preservative buffer was determined by LC-MS/MS method. Processed oral fluid samples on average recovered within  $\pm 20\%$  of their expected value based on the corresponding neat oral fluid result.

### Limitations

A positive result from this assay indicates only the presence of oxycodone and does not necessarily correlate with the extent of physiological and psychological effects.

It is possible that other substances and/or factors (e.g. technical or procedural), other than those investigated in the specificity study may interfere with the test and cause false results.

### Specific Performance Characteristics

Typical performance results obtained on the Beckman Coulter AU680 analyzer are shown below.

### Precision and Cutoff Characterization

Negative neat oral fluid samples were collected and prepared by spiking Oxycodone at negative, -75%, -50% and -25% below the cutoff, at the cutoff, and +25%, +50%, +75% and 100% above the cutoff. All spiked neat oral fluid sample concentrations were confirmed by LC-MS/MS. The neat oral fluid samples were processed using the Oral-Eze Oral Fluid Collection System to obtain diluted oral fluid samples. The diluted oral fluid samples were confirmed by LC-MS/MS and tested in the CEDIA Oxycodone OFT Assay in qualitative mode.

The randomized CLSI (EP5-A2) precision protocol was followed with two replicates of each sample for each run, two runs per day for twenty non-consecutive days, total N= 80/level.

The results are summarized in the table below.

Analyte	Tested Concentration (ng/mL)	Neat Oral Fluid LC-MS/MS (ng/mL)	Diluted Oral Fluid LC-MS/MS (ng/mL)	CEDIA Oxycodone OFT Assay # Neg / # Pos
Oxycodone	0	0	0	80 Neg / 0 Pos
Oxycodone	7.50	7.50	2.47	80 Neg / 0 Pos
Oxycodone	15.00	14.70	5.06	80 Neg / 0 Pos
Oxycodone	22.50	22.40	7.52	80 Neg / 0 Pos
Oxycodone	30.00	28.55	9.94	61 Neg / 19 Pos
Oxycodone	37.50	36.65	12.50	0 Neg / 80 Pos
Oxycodone	45.00	43.15	15.15	0 Neg / 80 Pos
Oxycodone	52.50	52.25	17.60	0 Neg / 80 Pos
Oxycodone	60.00	59.45	20.05	0 Neg / 80 Pos

### Specificity and Cross-Reactivity

Oxycodone and compounds structurally related to Oxycodone were tested for cross-reactivity in the assay. The cross-reactant solutions were prepared by adding the compounds to neat oral fluid samples at the concentration listed in the table below. The neat oral fluid samples were processed using the Oral-Eze Oral Fluid Collection System to obtain diluted oral fluid samples which were tested in the CEDIA Oxycodone OFT Assay. The compounds listed below produced a positive result at the lowest concentration tested or a negative result at the highest concentration tested.

Compounds	Tested Concentration In Neat Oral Fluid (ng/mL)	CEDIA Oxycodone OFT Assay Negative/Positive	% Cross-reactivity
6-Acetylmorphine	120,000	Positive	0.025%
Buprenorphine	125,000	Negative	$\leq 0.024\%$
Codeine	225,000	Positive	0.013%
Desmorphine	90,000	Positive	0.033%
Dihydrocodeine	60,000	Positive	0.05%
Fentanyl	125,000	Negative	$\leq 0.024\%$
Heroin	100,000	Positive	0.03%
Hydrocodone	18,000	Positive	0.167%
Hydromorphone	15,000	Positive	0.2%
Levorphanol	52,000	Positive	0.058%
Meperidine	125,000	Negative	$\leq 0.024\%$
Morphine	175,000	Positive	0.017%
Morphine-3- $\beta$ -D-glucuronide	60,000	Positive	0.05%
Naloxone	120,000	Positive	0.025%
Naltrexone	375,000	Negative	$\leq 0.08\%$
Norbuprenorphine	125,000	Negative	$\leq 0.024\%$
Norcodeine	375,000	Negative	$\leq 0.008\%$
Normorphine	375,000	Negative	$\leq 0.008\%$
Noroxycodone	60,000	Positive	0.05%
Noroxymorphone	80,000	Positive	0.038%
Oxycodone (Calibrator)	30	Positive	100%
Oxymorphone	30	Positive	100%
Oxymorphone-3- $\beta$ -D-glucuronide	30	Positive	100%
Tapentadol	125,000	Negative	$\leq 0.024\%$
Tramadol	125,000	Negative	$\leq 0.024\%$

Various common over-the-counter medications and structurally unrelated compounds were tested for cross-reactivity in the assay. The cross-reactant solutions were prepared by adding the compounds at the concentrations listed in the table below to neat oral fluid samples containing Oxycodone at  $\pm 50\%$  of the cutoff concentration. The neat oral fluid samples were processed using the Oral-Eze Oral Fluid Collection System to obtain diluted oral fluid samples which were tested in the CEDIA Oxycodone OFT Assay. The  $\pm 50\%$  cutoff level samples were detected accurately indicating that the added compounds did not exhibit any cross-reactivity in the assay.

Compounds	Tested Concentration In Neat Oral Fluid (ng/mL)	CEDIA Oxycodone OFT Assay Negative/Positive	
		-50% Oxycodone	+50% Oxycodone
Acetaminophen	60,000	Negative	Positive
Acetylsalicylic Acid	60,000	Negative	Positive
Alprazolam	60,000	Negative	Positive
Amobarbital	60,000	Negative	Positive
Amoxicillin	60,000	Negative	Positive
Ampicillin	60,000	Negative	Positive
Atropine	60,000	Negative	Positive
$\beta$ -Phenethylamine	60,000	Negative	Positive
Benzoylcegonine	60,000	Negative	Positive
Bupropion	60,000	Negative	Positive
Butabarbital	60,000	Negative	Positive
Butalbital	60,000	Negative	Positive
Caffeine	60,000	Negative	Positive
Captopril	60,000	Negative	Positive
Chlordiazepoxide	60,000	Negative	Positive
Chlorpromazine	60,000	Negative	Positive
Cimetidine	60,000	Negative	Positive
Clonazepam	60,000	Negative	Positive
Cocaethylene	60,000	Negative	Positive
Cocaine	60,000	Negative	Positive
<i>l</i> -Cotinine	60,000	Negative	Positive
Cyclizine	60,000	Negative	Positive
Dextromethorphan	60,000	Negative	Positive
Diazepam	60,000	Negative	Positive
Digoxin	60,000	Negative	Positive
Enalapril	60,000	Negative	Positive
Fluoxetine	60,000	Negative	Positive
Gentisic Acid	60,000	Negative	Positive
Ibuprofen	60,000	Negative	Positive
Imipramine	60,000	Negative	Positive
Lidocaine	60,000	Negative	Positive
Loperamide	60,000	Negative	Positive
Methadone	60,000	Negative	Positive
Metoprolol	60,000	Negative	Positive
Nalbuphine	60,000	Negative	Positive
Naproxen	60,000	Negative	Positive
Niacinamide	60,000	Negative	Positive
Nicotine	60,000	Negative	Positive
Nifedipine	60,000	Negative	Positive
Nordiazepam	60,000	Negative	Positive
Penicillin	60,000	Negative	Positive
Pentobarbital	60,000	Negative	Positive
Phencyclidine	60,000	Negative	Positive
Phenobarbital	60,000	Negative	Positive
Procainamide	60,000	Negative	Positive
Propoxyphene	60,000	Negative	Positive

Table continued

Compounds	Tested Concentration In Neat Oral Fluid (ng/mL)	CEDIA Oxycodone OFT Assay Negative/Positive	
		-50% Oxycodone	+50% Oxycodone
Quinidine	60,000	Negative	Positive
Salicylic Acid	60,000	Negative	Positive
Salbutamol	60,000	Negative	Positive
Secobarbital	60,000	Negative	Positive
Temazepam	60,000	Negative	Positive
Theophylline	60,000	Negative	Positive
Tolmetin	60,000	Negative	Positive
$\Delta^9$ -THC	60,000	Negative	Positive
11-nor- $\Delta^9$ -THC-COOH	60,000	Negative	Positive
Verapamil	60,000	Negative	Positive
Zomepirac	60,000	Negative	Positive

#### Endogenous and Exogenous Substances and pH Interference

The potential interference from several endogenous and exogenous substances, and pH on the detection accuracy of samples containing Oxycodone at  $\pm 50\%$  of the cutoff concentration was tested in the assay. The interfering substances were added to neat oral fluid at the concentrations listed in the table below. The neat oral fluid samples were processed using the Oral-Eze Oral Fluid Collection System to obtain diluted oral fluid samples which were tested in the CEDIA Oxycodone OFT Assay. The  $\pm 50\%$  cutoff level samples were detected accurately indicating that the added compounds did not show any interference in the assay.

Substances	Tested Concentration In Neat Oral Fluid	CEDIA Oxycodone OFT Assay Negative/Positive	
		-50% Oxycodone	+50% Oxycodone
Low Control	15 ng/mL	Negative	Positive
High Control	45 ng/mL	Negative	Positive
Cotinine	0.03 mg/mL	Negative	Positive
Nicotine	0.03 mg/mL	Negative	Positive
Human Serum Albumin	7.5 mg/mL	Negative	Positive
Sodium Chloride	18 mg/mL	Negative	Positive
Ascorbic Acid	1.875 mg/mL	Negative	Positive
Coffee	6% v/v	Negative	Positive
Orange Juice	6% v/v	Negative	Positive
Cranberry Juice	6% v/v	Negative	Positive
Soft Drink	6% v/v	Negative	Positive
Mouthwash	6% v/v	Negative	Positive
Tea	6% v/v	Negative	Positive
Denture Adhesive	6% v/v	Negative	Positive
Alcohol (Ethanol)	6% v/v	Negative	Positive
Baking Soda	6% v/v	Negative	Positive
Cough Syrup	6% v/v	Negative	Positive
Whole Blood	6% v/v	Negative	Positive
Hydrogen Peroxide	6% v/v	Negative	Positive
pH	5-9	Negative	Positive

#### Additional Interference From Other Food and Dental Products

Potential interference from additional compounds was tested by collecting neat oral fluid from volunteers after use of the following substances: hard candy, chewing gum, chewing tobacco, cigarettes, water, milk, toothpaste and tooth whitening strips. The  $\pm 50\%$  cutoff level samples in the presence of above interfering substances were detected accurately in the CEDIA Oxycodone OFT Assay.

## Method Comparison

Eighty samples were tested in the CEDIA Oxycodone OFT Assay in qualitative mode and the results were compared to LC-MS/MS. Comparison of the LC-MS/MS to the CEDIA Oxycodone OFT Assay showed 97.6% sensitivity and 100% specificity.

Candidate Device Results	Negative (Less than half the cutoff concentration by LC-MS/MS analysis)	Near Cutoff Negative (Between 50% below the cutoff and the cutoff by LC-MS/MS analysis)	Near Cutoff Positive (Between the cutoff and 50% above the cutoff concentration by LC-MS analysis)	High Positive (greater than 50% above the cutoff concentration by LC-MS/MS analysis)
Negative	31	8	1*	0
Positive	0	0	8	32

\*Discrepant sample is a borderline sample.

## References

1. Anderson D.T., Fritz K.L., and Muto J.J. OxyContin®: The concept of a "Ghost Pill" and the Postmortem Tissue Distribution of Oxycodone in 36 Cases. *J. Anal. Toxicol.* 2002, 26: 448-459.
2. *Clinical & Forensic Toxicology News*, Oxycodone: Recognition and Pharmacogenomics. By Jannetto P.J. and Gock S.B. March 2003.
3. Cone E.J., et al, Oxycodone Involvement in Drug Abuse Deaths: A DAWN-Based Classification Scheme applied to an Oxycodone Postmortem Database Containing over 1000 Cases. *J. Anal. Toxicol.* 2003, 27: 57-67.
4. Oxycodone. In: Baselt R.C. and Cravey R.H. *Disposition of toxic drugs and chemicals in man*, 4th ed. Chemical Toxicology Institute, Foster City, California: 1995: 572-574.
5. Henderson DR, Friedman SB, Harris JD et al. CEDIA, a new homogeneous immunoassay system. *Clin Chem.* 1986; 32: 1637-1641.

## Explanation of Symbols

	Lot Number
	Catalog Number
	Temperature Limitation
	Consult Instructions for Use
	Use By
	Caution
	Manufacturer
	Health Hazard
	Reagent
	Contents
	Require Reconstitution



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