



IDAHO DEPARTMENT OF  
**HEALTH & WELFARE**

<b>Test Title</b>	<b>Nerve Agent Metabolites (GB (Sarin), GF, GD (Soman), VX, and Russian VX)</b>
<b>Sample Requirements</b>	1. Specimen type: Urine
<b>Sampling Materials</b>	1. Sample container: Sterile urine specimen collection cup, filled with minimum of 25 mL urine
<b>Procedural Notes</b>	1. <a href="#">Chemical Threat Test Request Form</a> for sample submissions 2. For all samples suspected of containing a chemical threat agent contact the IBL Emergency Preparedness Section <u>before</u> sample collection and/or submission. TEL: 208-334-2235 3. Submit a blank urine specimen collection cup along with the sample.
<b>Shipping Instructions</b>	1. Temperature/preservative instructions: a. Samples should be stored and transported at frozen temperatures (< 0°C). 2. Packaging: a. Package sample in a leak-proof container for transport as per DOT or other shipping regulations such as IATA. b. Ship as a Category B biological substance. 3. Ship to: Idaho Bureau of Laboratories <b>ATTN: LRN-C Laboratory</b> 2220 Old Penitentiary Rd Boise, ID 83712
<b>Reporting and Turnaround Time (TAT)</b>	1. TAT: 1-5 business days