

BURLINGTON COUNTY BAR ASSOCIATION

Interpreting Your Client's Drug Lab Results: Were They Impaired?



DO LAB RESULTS MATTER IN A DUI-D?

YES

- ***State v. Olenowski* DRE challenge**—outcome will likely add significant weight to toxicology results in DUI-D cases
- **Lab and Science v. DRE**— When the lab results are not assailable due to accuracy or resources

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- ***State v. Olenowski* DRE challenge**—outcome will likely add significant weight to toxicology results in DUI-D cases
- **Lab and Science v. DRE**— When the lab results are not assailable due to accuracy or resources are limited

--BREAKING NEWS--

NEW JERSEY IS IN THE
MIDDLE OF HISTORIC
HEARINGS ON THE
ADMISSIBILITY OF “DRE”
OPINIONS

State v. Olenowski

WHY DREs?

STATE v. SMITH-- NJ SUPREMES 1971 & NJRE 701

ALCOHOL INTOXICATION FACTS AND OPINION –NO EXPERT NEEDED

STATE v. BEALOR—NJ SUPREMES 2005 & NJRE 702 (THE “NEED”)

**EXPERT TESTIMONY REMAINS THE PREFERRED METHOD OF PROOF OF MARIJUANA
INTOXICATION**

SPECIALIZED LAY WITNESS?

OTHER DRUGS—EXPERT NEEDED?

THE 12 STEP DRE EVALUATION

- BREATH ALCOHOL SCREENING
- DRE INTERVIEWS ARRESTING OFFICER
- PRELIMINARY EXAM & FIRST PULSE
- EYE EXAMS: TRACKING, EQUAL PUPIL SIZE, HGN, VGN, AND NON-CONVERGENCE
- DIVIDED ATTENTION TESTS: ROMBERG (BODY SWAY AND 10 SECOND INTERVAL CLOCK), WAT, OLS, FINGER-TO-NOSE
- VITAL SIGNS & SECOND PULSE
- DARK ROOM CHECKS OF PUPIL SIZE (WAIT 90 SECONDS), NASAL & ORAL CAVITY EXAM
- CHECK FOR MUSCLE TONE
- CHEK FOR INJECTION MARKS & THIRD PULSE
- INTERROGATION, STATEMENTS, AND OTHER OBSERVATIONS
- OPINION OF EVALUATOR
- TOXICOLOGICAL EXAM

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DRUG EVALUATION PROGRAM

3 STEP PROCESS

- Verify That The Suspect Is Impaired And That The BAC Is Not Consistent With The Degree Of Impairment
- Determine Whether The Impairment Is Drug Related *Or* Medically Related (Injury Or Illness)
- Use **“Proven Diagnostic Procedures”** To Determine The Category (Or Combinations) Of Drugs That Is/Are The Likely Cause Of Impairment

STATE v. OLENOWSKI
NJ Supreme Court

“Proven Diagnostic Procedures”

THE EXISTING FACTUAL RECORD IS INADEQUATE
TO TEST THE VALIDITY OF DRE EVIDENCE

UNTIL SUCH A RECORD IS ESTABLISHED, THE
COURT ***SHOULD NOT ADDRESS*** THE QUESTION OF
THE ADMISSIBILITY OF THE DRE EVIDENCE
PRESENTED IN THIS CASE UNDER NJRE 701 or 702

STATE v. OLENOWSKI
NJ Supreme Court

**Judge Lisa is appointed as Special Master and will
conduct:**

**“a plenary hearing to decide whether DRE
evidence has achieved general acceptance
within the relevant scientific community and
therefore satisfies the reliability standard of
NJRE 702”**

NEW JERSEY

- **NO *REPORTED* APPELLATE DIVISION CASE APPROVING USE OF DRE EVALUATIONS TO ASSESS DRIVING IMPAIRMENT**
- ***STATE v. REITER*: NJ App. Div. 2007 (UNREPORTED) – ADMISSIBLE TESTIMONY BUT... (“trained and certified”)**

THREE APPROACHES

#1

- Oregon and Washington have conducted scientific admissibility hearings (*State v. Baity* 2000)
- Limited hearings--held that “some” of the components of the DRE Program are scientific and admissible under those two states’ standards
- **Conditional admissibility:** every step of the twelve step process must be completed **AND** the toxicology must be complete, admissible and corroborative

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THREE APPROACHES

#3

- The majority view of US state courts
- *Frye/Daubert* hearing is not required because DRE evidence does not meet the “new or novel” requirement that would trigger such a hearing
- “Common observations cloaked in scientific garb”
- DRE can testify because its merely recitation of observations any witness would make

THREE APPROACHES

#3

- UNDER MAJORITY APPROACH, THE DRE'S OPINION IS CONSIDERED A LAY OPINION *ONLY*
- THEREFORE CORROBORATIVE TOXICOLOGY BECOMES CRITICAL!

THREE APPROACHES

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- UNDER MAJORITY APPROACH, THE DRE'S OPINION IS CONSIDERED A LAY OPINION *ONLY*
- THEREFORE **CORROBORATIVE** TOXICOLOGY BECOMES CRITICAL!

CORROBORATIVE OR NECESSARY?

DRE MANUAL SAYS THAT THE TOXICOLOGY IS CORROBORATIVE—
MORE DIFFICULT ARGUMENT NOW
UNDER NEWER *I.A.C.P.* GUIDANCE

HOWEVER, IT IS PART OF THE 12 STEP
DRE MATRIX THAT *MUST* BE COMPLETED
IN ITS ENTIRETY

Debunking the “corroborative” DRE findings with a 2 step approach

- ***Step #1:*** Establish what observations not corroborative of impairment in your unique client’s behavior
- ***Step #2:*** Evaluate the quantitative presence of drugs found in defendant’s toxicology
- ***Limits to Defense:*** Need Rx and reasonable facts

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THE 12 STEP DRE EVALUATION

ONE MOMENT
IN TIME

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STEP #1

Establish What's Not Corroborative

- DRE doesn't know your client except one moment in time
- Behavioral pattern may not comport with drug impairment, but your client's individual circumstances
- Buttressed by treating physician who has been monitoring prescriptions and adjusting to allow functionality

EXPLORE “OTHER FACTORS”

- General appearance
- Cognitive level
- Neuro conditions
- Driving explanation
- Condition for which Rx given
- Subject’s normal baseline
- Pre-existing conditions
- Age
- Weight
- Historical dosage Hx
- Dosage Hx that day
- Dexterity

THINGS THAT MIMIC DRUG CLASS

- ***CNS DEPRESSANTS***: FATIGUE, HEAD INJURY, DIABETIC REACTION, HYPOTENSION, INNER EAR DISORDER, SEVERE DEPRESSION
- ***CNS STIMULANTS***: HYPERACTIVITY, NERVOUSNESS, STRESS, HYPERTENSION, FEAR
- ***HALLUCINOGENS***: HIGH FEVER, MENTAL ILLNESS

THINGS THAT MIMIC DRUG CLASS

- *DISSOCIATIVE ANESTHETIC*: MENTAL ILLNESS
- *NARCOTIC ANALGESIC*: FATIGUE, RECENT HEAD INJURY, DIABETIC REACTION, HYPOTENSION, SEVERE DEPRESSION
- *INHALANTS*: SEVERE HEAD INJURY, INNER EAR DISORDERS
- *CANNABIS*: ATTENTION DEFICIT DISORDER, “THE MUNCHIES”

STEP #2
**DO THE TOXICOLOGY RESULTS SUPPORT A
CONCLUSION INCONSISTENT WITH THE DRE
OPINION?**

WHEN IT WORKS BEST

- 1. THERAPEUTIC RANGE RESULT**
- 2. UNDER DOCTOR CARE WITH Rx– THE
REAL DEAL IN “PROVEN DIAGNOSTIC
PROCEDURES”**

SOME TERMS

- ***Tolerance***–Acquired ability of the body after regular exposure to a drug to react less acutely to drug's effects
- ***Half-life***–the amount of time for the human body to eliminate $\frac{1}{2}$ of an administered dose of drug
- ***Therapeutic levels***– concentration of drug and/or its active metabolite(s) present in the blood (serum or plasma) following therapeutically effective dosage in humans–at steady state

Pharmacokinetics (PK) Dosage Route

- PK is what the body does to drugs once ingested
- Stomach to veins to liver
- Liver will metabolize a portion depending on solubility
- Remainder back out into circulation and eventually back to liver
- Cycle continues until body metabolizes the drug and completely eliminates it

THERAPEUTIC DOSE & THERAPEUTIC RANGE

HOW DO WE DETERMINE?

Winek, Baselt, and Schulz/Schmoldt
charts

Therapeutic, toxic, and lethal
dosage for thousands of drugs

THERAPEUTIC DOSE & THERAPEUTIC RANGE

WINEK

https://www.abmdi.org/documents/winek_tox_data_2001.pdf

BESELT, RANDALL

Disposition of Toxic Drugs and Chemicals in Man

SCHULZ & SCHMOLDT

Therapeutic and toxic blood concentrations of more than 800 drugs and other xenobiotics

Pharmazie 58, 447-474 (2003)



February 10, 2020

[REDACTED] Police Department

TOXICOLOGY REPORT IN THE CASE OF:

[REDACTED]
DrugScan Accession No: [REDACTED]

EXAMINATION: Under the Influence of Alcohol, other Volatile Intoxicants and/or Common Controlled Substances

SPECIMENS: Received in a Sirchie Kit –
Two (2) sealed and labeled GRAY top tubes BLOOD –
on January 28, 2020 from [REDACTED]

FINDINGS¹:

1. ALPRAZOLAM (Xanax) –

69 nanograms Alprazolam/mL BLOOD

Benzodiazepines were detected using a qualitative screening assay and Alprazolam was identified, confirmed and measured by liquid chromatography/mass spectrometry/mass spectrometry.

2. COCAINE --

43 nanograms Cocaine/mL BLOOD
425 nanograms Benzoyllecgonine (Cocaine metabolite)/mL BLOOD

Cocaine related products were detected using a qualitative screening assay and cocaine and cocaine metabolite (benzoyllecgonine) were identified, confirmed and measured by liquid chromatography/mass spectrometry/mass spectrometry.

3. CANNABINOIDS (Marijuana) --

3 nanograms Delta-9-THC (Marijuana constituent)/mL BLOOD
19 nanograms 9-Carboxy-THC (Marijuana metabolite)/mL BLOOD

Cannabinoids were detected by immunochemical assay and were identified, confirmed and measured by gas chromatography/mass spectrometry.

¹Positive chromatographic data attached.

██████████ Police Department

February 18, 2020

TOXICOLOGY REPORT IN THE CASE OF:

██████████
DrugScan Accession # ██████████

EXAMINATION: Under the Influence of Alcohol, other Volatile Intoxicants and/or Controlled Substances

SPECIMENS: Received in Focchie Kit –
Two (2) sealed and labeled GRAY top tubes BLOOD –
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FINDINGS¹:

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4. OXYCODONE (e.g., OxyContin) –

31 nanograms Oxycodone/mL BLOOD

Opiates were detected using a qualitative screening assay and Oxycodone was identified, confirmed and measured by liquid chromatography/mass spectrometry/mass spectrometry.

COMMENTS:

1. Alprazolam (Xanax) is a potent benzodiazepine controlled substance used in the treatment of anxiety. Following a single 1 mg oral dose peak plasma levels ranged from 10 to 20 nanograms/mL. Following chronic therapy (0.5 mg t.i.d.) steady state levels averaged 20 nanograms/mL. Patients clinically prescribed this potent depressant medication are warned accordingly, especially concerning motor vehicle operation.

Alprazolam is commonly abused as a "street" drug in combination with other controlled substances.

2. Following typical use of cocaine, blood plasma levels generally reach several tens to several hundreds of nanograms/mL, declining over a period of the next several hours to undetectable amounts.

Cocaine is a Schedule II listed excitant stimulant, capable of causing restlessness, excitement, talkativeness, and occasionally, aggressive or manic behavior.

Cocaine breaks down into the controlled (Scheduled II) non-active substance Benzoylcegonine, and can continue to do so even after the specimen has been collected.

3. Delta-9-THC (tetrahydrocannabinol) is the principal psychoactive ingredient of marijuana - a Schedule I controlled substance. It is metabolized to the non-psychoactive compound Delta-9-Carboxy-THC. Following absorption by smoking, plasma levels of THC rise very rapidly, and peak levels are attained in a few minutes. These plasma levels then decline rapidly during the next hour, then more slowly over the next several hours, becoming undetectable (around 0.5 ng/mL) usually about 6 hours later. Delta-9-Carboxy-THC levels rise more slowly, and persist longer, being detectable for approximately 24 hours.
4. Oxycodone is a controlled (Scheduled II) narcotic analgesic, often compounded with other ingredients such as non-narcotic analgesics. Its indications, uses, and effects are similar to morphine. Following typical clinical intake, plasma levels range from 10 to 40 nanograms/mL.

CONCLUSION:

At and around the time the blood was drawn, it is reasonably scientifically certain that this individual --

- was a recent user of – ALPRAZOLAM, COCAINE, MARIJUANA and OXYCODONE- in pharmacologically significant dosage amounts;
- was under the impairing psychoactive effects of Alprazolam, Cocaine, Marijuana and Oxycodone; and
- was unfit to operate a motor vehicle safely on the highway.

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¹Positive chromatographic data attached.

Alprazolam

- Benzodiazepine family; CNS depressant

Winek

DRUG	<u>Therapeutic or Normal</u>		<u>Toxic</u>		<u>Lethal</u>		
	mg%	ug/ml	mg%	ug/ml	mg%	ug/ml	
Alprazolam	0.025 - 0.102		***	***	0.0122 - 0.039		0.122 - 0.39

Schulz & Schmoldt

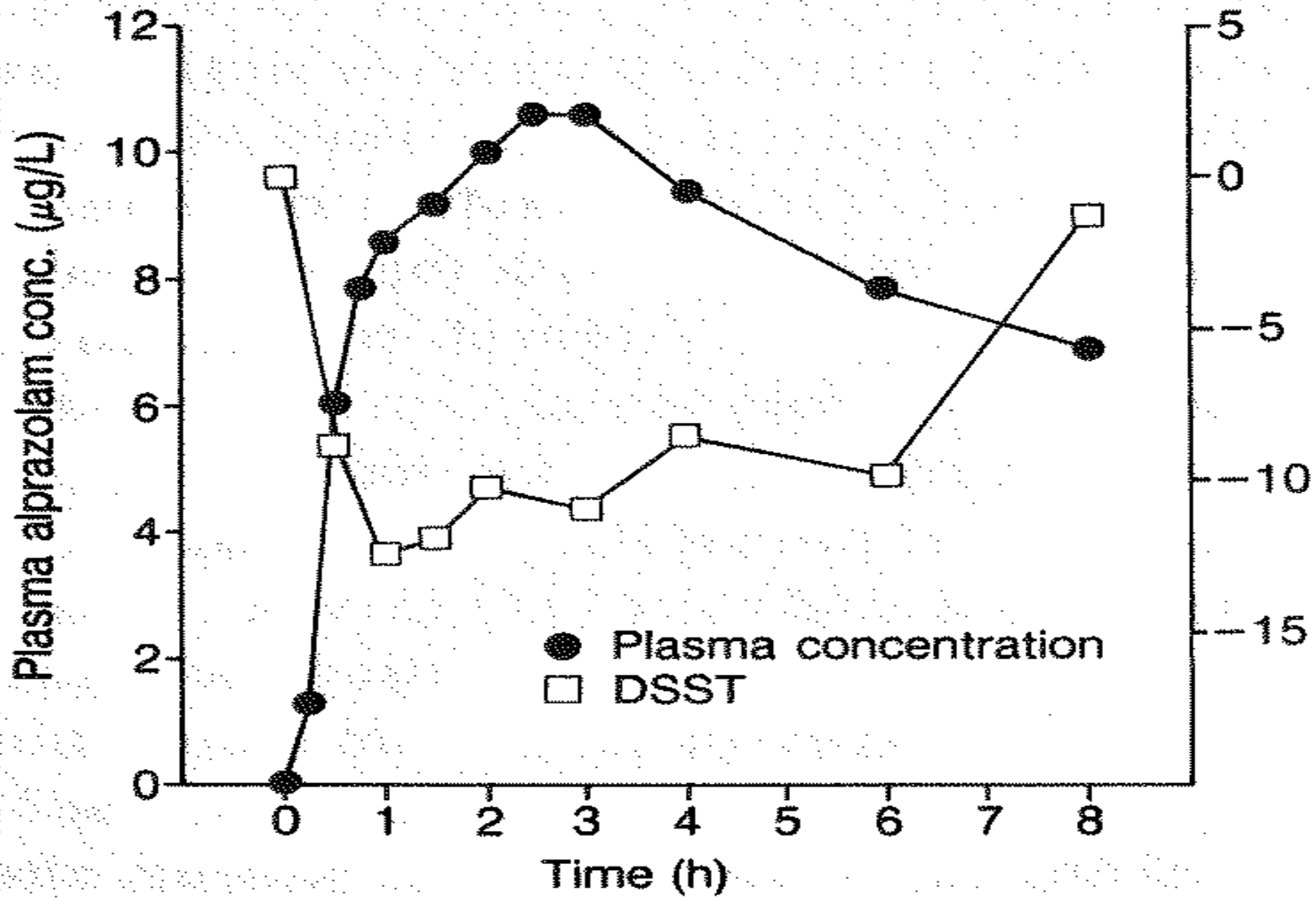
0.005–0.05

0.1–0.4

- Micrograms/L (ug) same as ng/L but labs (like DrugScan) usually report in ng/mL
- Convert by x1000
- **Winek** therapeutic range Alprazolam is **25-102** ng/mL
- **Schulz** therapeutic range is **5-50** ng/mL
- Client results: 69 ng/mL

Analysis

- Therapeutic range close to lab results
- Other human variables involved
- Alprazolam comes in 0.5mg, 1.0mg, and 2.0mg doses
- Very possible for multi-dose per day individual to have 69 ng plasma levels without impairing effect based on tolerance and other factors including “steady state” of drug



PK Variables on Blood Plasma Levels of Drug

- Age
- Weight (lipid solubility)
- Gender
- Ethnicity
- Renal or liver disease
- Cigarette smoking
- Menstrual cycle
- Alcoholism

Cocaine

- Reported results are 43 ng/mL BLOOD

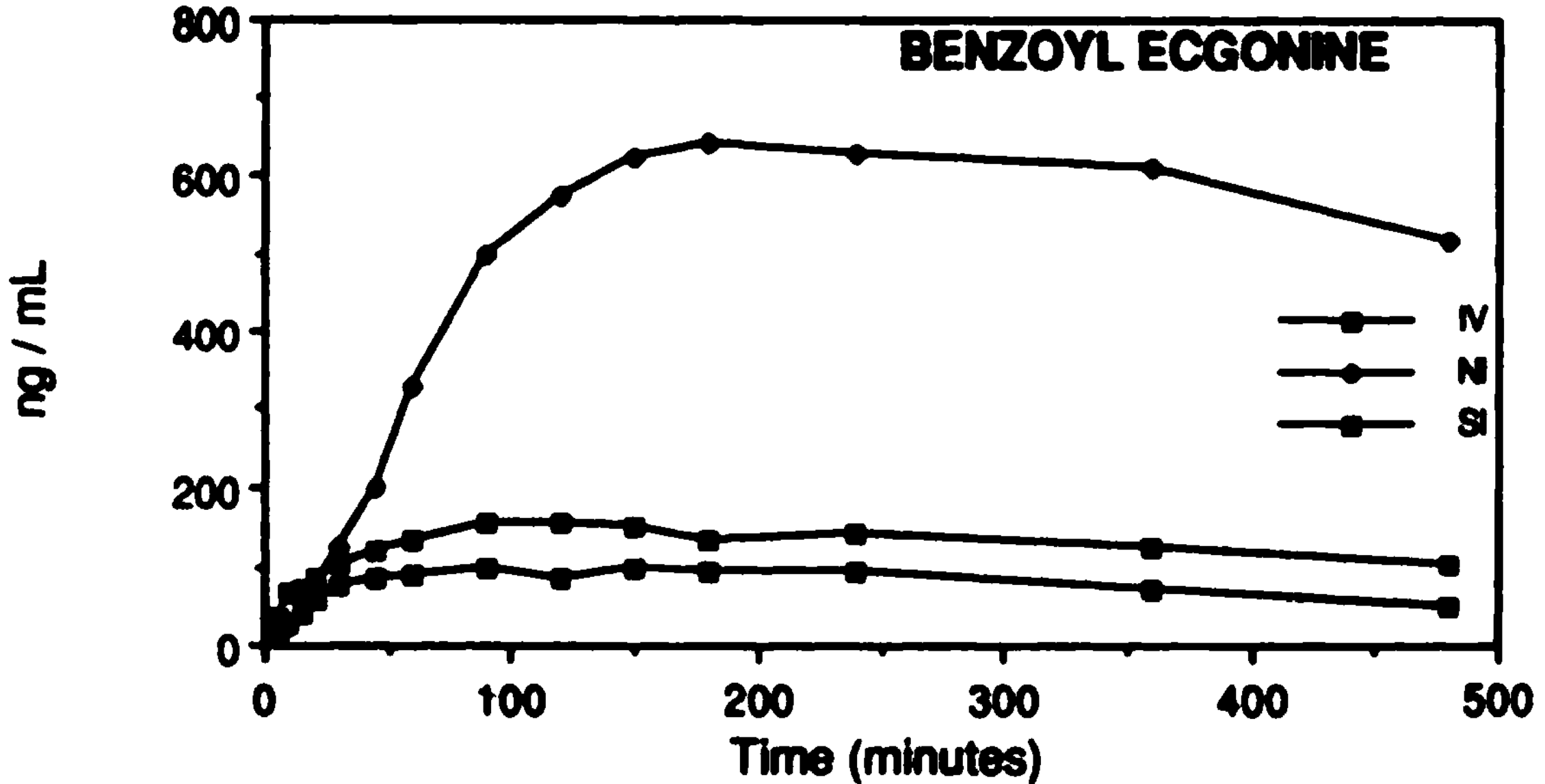
Therapeutic Ranges

- Winek: 50–93 ng/mL
- Schulz/Schmoldt: 50–300 ng/mL
- *Lesson:* wide range of authority on “therapeutic range”

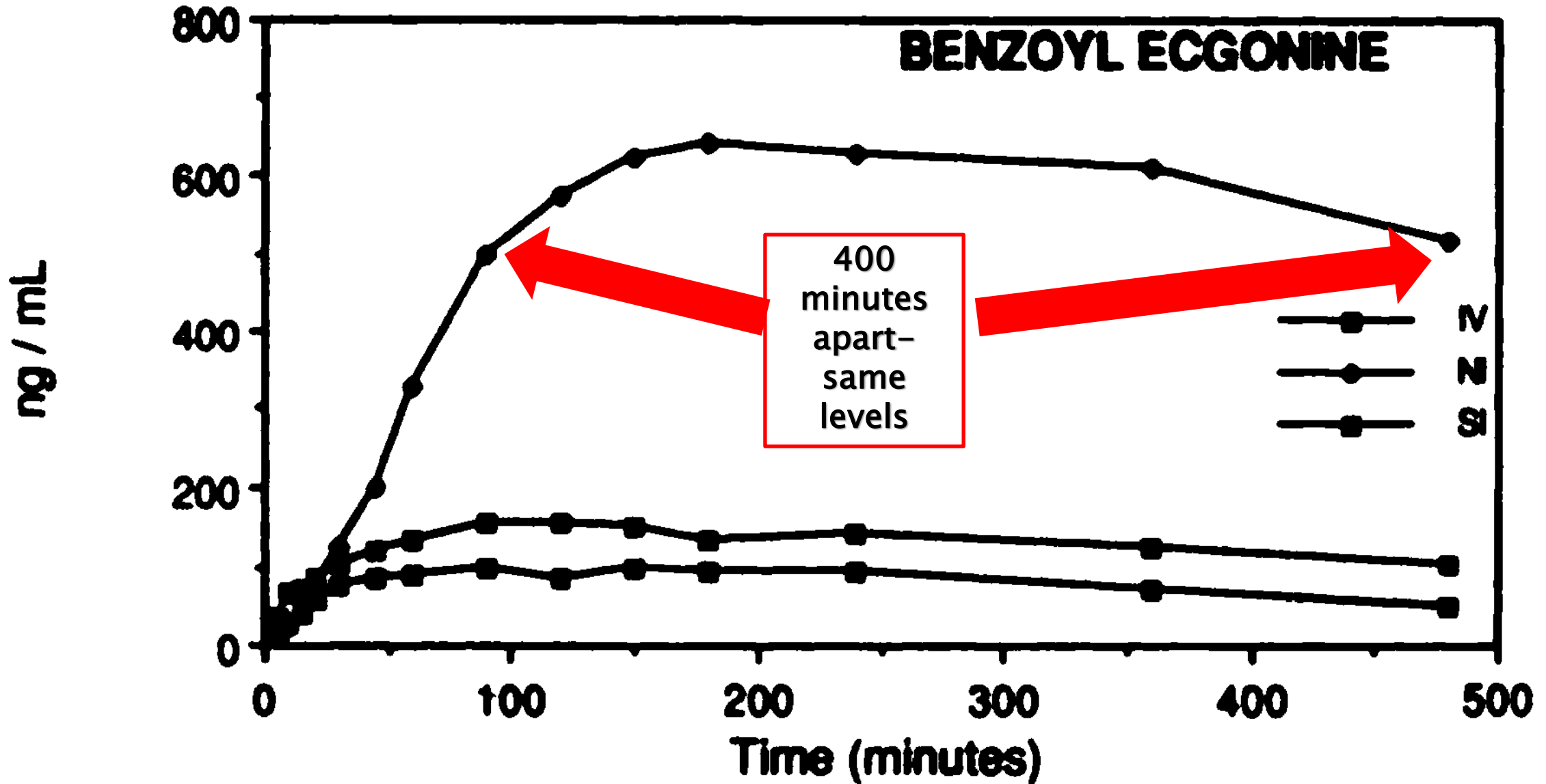
What about Benzoyllecgonine?

- 1st pass metabolite of parent drug cocaine
- Non-psychoactive compound
- Presence in lab results is significant only to determine time of dosage vis-à-vis cocaine results (needed)

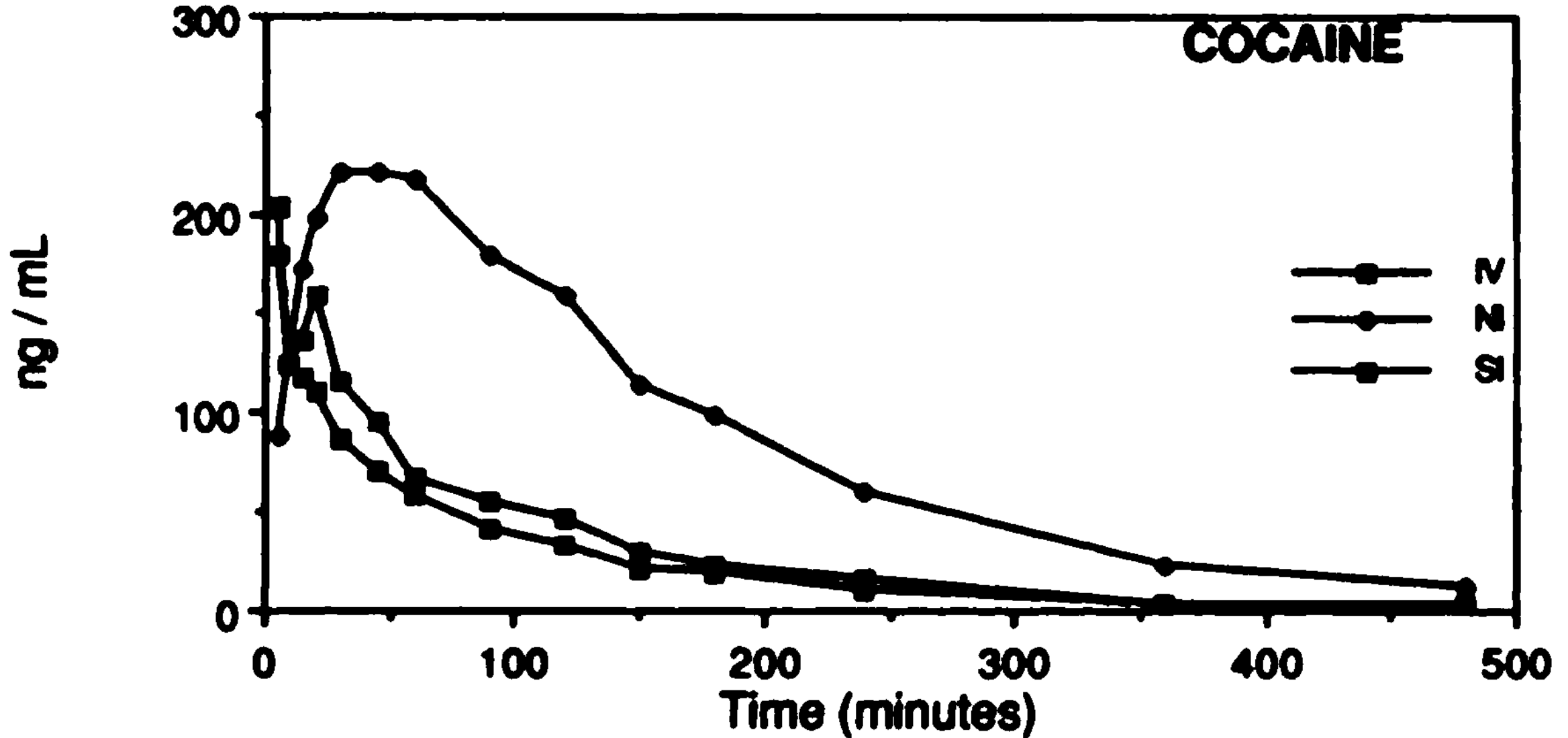
Cocaine & Benzoylecgonine



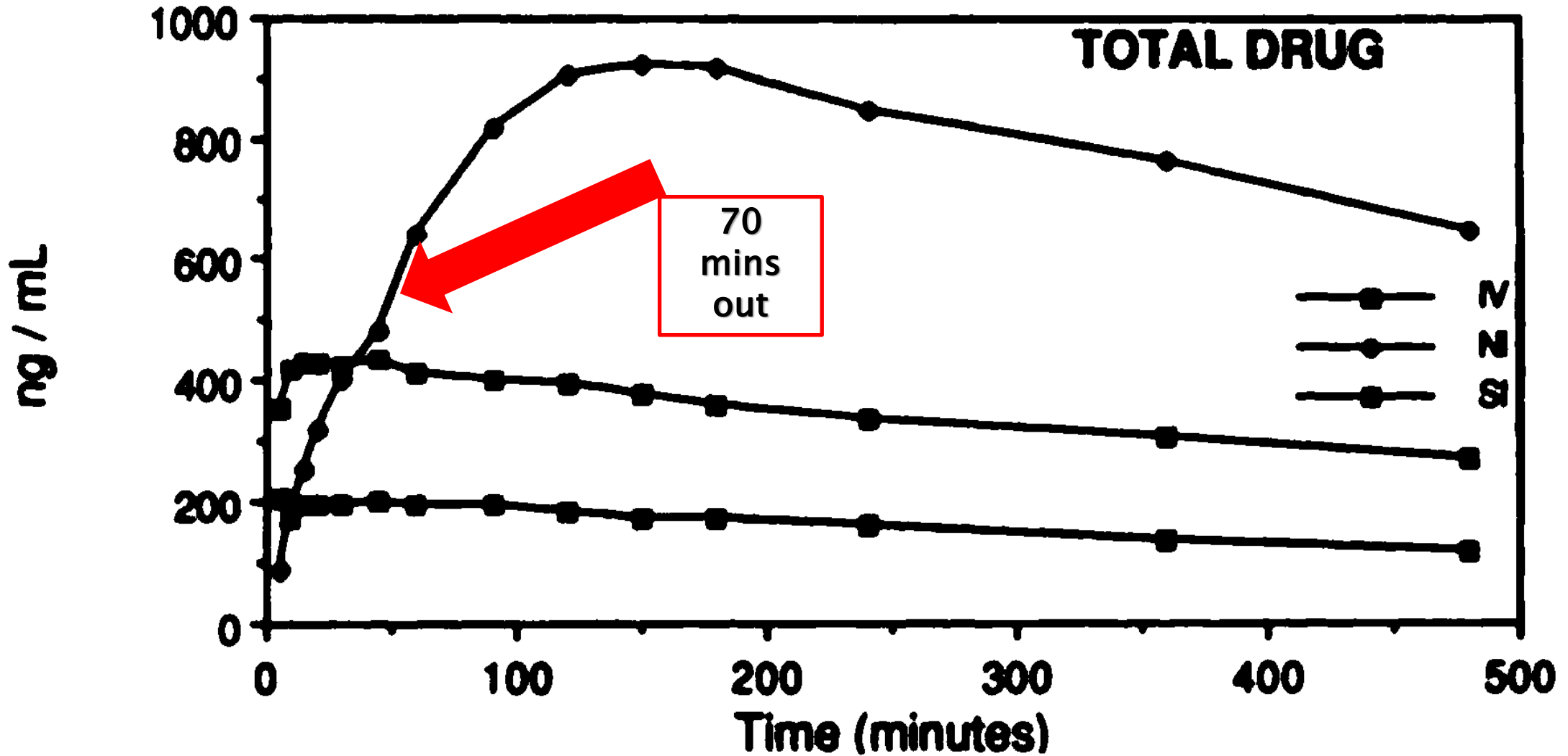
Cocaine & Benzoylecgonine (500 ng/mL)



Cocaine & Benzoylecgonine (50 ng/mL)



Cocaine & Benzoylecgonine (500 ng + 50 ng/mL)



- **Source:** *Cocaine disposition in humans after intravenous injection, nasal insufflation (snorting), or smoking, AR Jeffcoat, et al; Drug Metab Dispos; Mar-Apr 1989;17(2):153-9*

Oxycodone

Narcotic analgesic

- Our results: 31 ng/mL
- *Winek*: 10–100 ng/mL
- *Schulz*: 20–50 ng/mL
- Well within therapeutic range with either source

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Alprazolam is commonly abused as a "street" drug in combination with other controlled substances.

2. Following typical use of cocaine, blood plasma levels generally reach several tens to several hundreds of nanograms/mL, declining over a period of the next several hours to undetectable amounts.

Cocaine is a Schedule II listed excitant stimulant, capable of causing restlessness, excitement, talkativeness, and occasionally, aggressive or manic behavior.

Cocaine breaks down into the controlled (Scheduled II) non-active substance Benzoylecgonine, and can continue to do so even after the specimen has been collected.

3. Delta-9-THC (tetrahydrocannabinol) is the principal psychoactive ingredient of marijuana - a Schedule I controlled substance. It is metabolized to the non-psychoactive compound Delta-9-Carboxy-THC. Following absorption by smoking, plasma levels of THC rise very rapidly, and peak levels are attained in a few minutes. These plasma levels then decline rapidly during the next hour, then more slowly over the next several hours, becoming undetectable (around 0.5 ng/mL) usually about 6 hours later. Delta-9-Carboxy-THC levels rise more slowly, and persist longer, being detectable for approximately 24 hours.
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“FOLLOWING TYPICAL
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Cocaine breaks down ... he controlled (Scheduled II) non-active substance Benzoylecgonine, and can continue to do so even ... the specimen has been collected.

- 3. Delta-9-THC (tetrahydrocannabinol) is the principal psychoactive ingredient of marijuana - a Schedule I controlled substance. It is metabolized to the non-psychoactive compound Delta-9-Carboxy-THC. Following absorption by smoking, plasma levels of THC rise very rapidly, and peak levels are attained in a few minutes. These plasma levels then decline rapidly during the next hour, then more slowly over the next several hours, becoming undetectable (around 0.5 ng/mL) usually about 6 hours later. Delta-9-Carboxy-THC levels rise more slowly, and persist longer, being detectable for approximately 24 hours.

- 4. Oxycodone is a controlled (Scheduled II) narcotic analgesic, often compounded with other ingredients such as non-narcotic analgesics. Its indications, uses, and effects are similar to morphine. Following typical clinical intake, plasma levels range from 10 to 40 nanograms/mL.

CONCLUSION:

At and around the time the blood was drawn, it is reasonably scientifically certain that this individual --

- was a recent user of – ALPRAZOLAM, COCAINE, MARIJUANA and OXYCODONE- in pharmacologically significant dosage amounts;
- was under the impairing psychoactive effects of Alprazolam, Cocaine, Marijuana and Oxycodone; and
- was unfit to operate a motor vehicle safely on the highway.

Marijuana

- Possible Compounds

- ***Delta-9 THC***—parent drug; psychoactive properties
- ***Delta-9-hydroxy-THC*** (THC-OH)—1st pass metabolite; psychoactive properties
- ***THC-COOH*** (carboxy THC)—inactive metabolite; no psychoactive effect whatsoever

Marijuana

Our results

- 3 ng/mL delta-9 THC BLOOD (parent drug)
- 19 ng/mL delta-9-THC-COOH (carboxy)
- *Source: Marilyn Huestis studies: 13.1 ng/mL THC (blood) is about equivalent to 0.08% BAC EtOH*
- *R Hartman, et al. Cannabis Effects on Driving Lateral Control with and without Alcohol. Drug & Alcohol Depend Sept 2015 pgs 25-37*
- *Hartman RL, Brown TL, Milavetz G, Spurgin A, Gorelick DA, Gaffney G, & Huestis MA (2015b). Controlled cannabis vaporizer administration: blood and plasma cannabinoids with and without alcohol. Clinical Chemistry.61:850-869*

Relationship Between Time After Smoking, Average Blood THC Concentration (ng/mL), and Percentage of Subjects Considered Impaired Under Standardized Field Sobriety Tests (SFSTs)^a

Dose	Time 1 (0–5 min)		Time 2 (50–55 min)		Time 3 (100–105 min)	
	Blood THC	% impaired	Blood THC	% impaired	Blood THC	% impaired
Placebo	0	2.5	0	7.5	0	5
1.74% THC	55.5	23	6.8	23	3.7	15
2.93% THC	70.6	46	6.2	41	3.2	28

THC, Δ^9 -tetrahydrocannabinol.

^aTime 1, 0 min after smoking for blood sampling and 5 min for SFSTs; Time 2, 50 min after smoking for blood sampling and 55 min for SFSTs; Time 3, 100 min after smoking for blood sampling and 105 min for SFSTs.

**WHAT IF THERAPEUTIC RANGE CHARTS
DO NOT GIVE YOU WHAT YOU NEED?**

PLAN “B”

THERAPEUTIC DOSE & THERAPEUTIC RANGE

One size fits all?



THERAPEUTIC DOSE & THERAPEUTIC RANGE

WINEK CRITICISM

- Information obtained **post-mortem** to determine OD cause of death, not driving impairment
- Behavioral tests relied upon are not sourced (Schulz/Schmoldt does source)
- Matrix not reported—and it matters. Whole blood, serum blood, urine???

THERAPEUTIC DOSE & THERAPEUTIC RANGE

Winek's and Baselt's charts

- ***Self disclosed caveats in data:*** The values can be affected by dose, route of administration, absorption differences, age
- The values can be affected by gender, tolerance, method of analysis, pathological or disease state, postmortem redistribution, etc.

THERAPEUTIC DOSE & THERAPEUTIC RANGE

- There is no therapeutic drug level in urine for **ANY** drug
- There is **NO** correlation of urine concentration to pharmacologic effect
- There is no agreed upon therapeutic drug level for oxycodone in the blood

SCIENCE STUFF

- At lower doses, marijuana “does not affect simple motor skills” (*Source:* DRE Student Manual)
- Alprazolam can actually increase pulse and irritability (contrary to DRE Student Manual which indicates it lowers pulse)(*Source:* Drugs.com)

SCIENCE STUFF

- Benzoyllecgonine (inactive metabolite) detected for 2–3 days after cocaine abstinence v. 12 hours or less for cocaine; (*Source*: J. Anal. Tox., Jufer, RA, 2000)
- THC–COOH (inactive metabolite) can be detected in urine more than 30 days after cannabis abstinence; non–psychoactive metabolite (*Source*: multiple Huestis studies)
- Virtually impossible to scientifically associate a degree of drug influence based on the blood plasma level of amphetamine (*Source*: Jour. Society for the Study of Addiction, 2007, Jones, A.)

THAT'S IT FOR NOW
Stay Safe



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Therapeutic and toxic blood concentrations of more than 800 drugs and other xenobiotics

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In order to assess the significance of drug levels measured in clinical and forensic toxicology as well as for Therapeutic Drug Monitoring (TDM) it is essential that good collections of data are readily available. For more than 800 substances, therapeutic ('normal') and, if data was available, toxic, and fatal plasma concentrations as well as elimination half-lives were compiled in a table. The compilation includes data for hypnotics, benzodiazepines, neuroleptics, antidepressants, sedatives, analgesics, anti-inflammatory agents (e.g., NSAIDs), antihistamines, antiepileptics, betaadrenergic antagonists, antibiotics (penicillins, cephalosporins, aminoglycosides, gyrase inhibitors), diuretics, calcium-channel blockers, cardiac glycosides, antiarrhythmics, antiasthmatics, ACE-inhibitors, opiate agonists, and local anesthetics, among others. In addition, toxicologically relevant xenobiotics were listed. Data have been abstracted from published information, both compilations and primary sources and have been completed with data collected in our own forensic and clinical toxicology laboratories. Wherever possible, ranges for therapeutic plasma concentrations are expressed as trough concentration at steady state. The half-life values given for each drug are chosen to represent the terminal log-linear phase at most. It is the purpose to rapidly assess the significance of drug levels for the therapeutic monitoring of patients, and to facilitate the diagnostic and clinical assessment in case of intoxications.

1. Introduction

It has been common for several years that plasma concentrations of drugs having a narrow therapeutic range have to be measured. This accounts, among others, for antiepileptics, cardiac glycosides, aminoglycosides, antiarrhythmics, theophylline, immunosuppressants, and few cytostatics. It is indicated to draw blood samples for the following reasons: if doses are high and borderline, if signs of overdosage occur although the dose is within normal range (e.g. genetic polymorphism), if there is no effect although the dose is correct or if non-compliance can be expected. In general, plasma concentrations at steady state are retrievable from dosage and pharmacokinetic data. However, sufficient pharmacokinetic data are often not available. Therefore, it makes sense to offer a compilation of therapeutic and toxic plasma concentration ranges for quick information. A list [469] published in 1997 has been completely revised and updated. In particular, data for drugs recently introduced to the market have been added. Reviews, compilations of other authors [e.g., 28, 99, 100, 109, 111, 112, 114, 155, 268, 269, 340, 354, 395, 423, 426–429, 495, 528, 534] and publications concerning individual drugs/xenobiotics and case reports have been used to set up the database. Experience

gained over several years from working in the clinical and forensic toxicological field also contributed to the following list.

2. Selection and criteria for evaluation

The substances have been selected by clinical and toxicological aspects, by frequency of prescribing and other matters in the area of internal intensive care medicine as well as clinical and forensic toxicology. There is an increase in determining antibiotic concentrations using analytical and chemical methods and there are special cases which are closely monitored although therapeutic concentrations depend on the susceptibility of the microorganisms and tissue concentrations are often more reliable.

Screening the data in daily practice, it became obvious that for many well known drugs there is only insufficient pharmacokinetic data available. However, for current substances little documented data is published about intoxications and their plasma/blood concentrations.

In general, therapeutic plasma concentration ranges or concentrations found after therapeutic dosing refer to trough levels at steady state. Inter-individual deviation is high. Therefore, any data listed can only be taken as orientation.

Often, it is not possible to find the threshold between the therapeutic and toxic concentration for the specific patient. This is the case if tolerance develops and if drug interactions or additional diseases are involved. In order to keep the overall context clear, we preferred not to go into further details.

Data about fatal plasma concentrations consciously orient on life threatening or lethal intoxications who occurred at low plasma concentrations so that actual and potential dangers in clinical cases are not being underestimated. Many intoxicated patients survived even with significantly higher concentrations. It is also difficult to relate the concentrations to the clinical picture because the interval between intake of the drug and drawing a blood sample is

generally unknown. In any case, it is more relevant to have the correct concentration measured rather than how much drug has been – presumably – taken. Statements about case histories are often not reliable. And often, it is not known how much drug has been absorbed after intake of charcoal, due to vomiting and/or irrigation of the stomach. Elimination half-lives are statistically more reliable than data gathered in case of intoxications. Yet even with this data, substantial deviation can be expected. In addition, most pharmacokinetic parameters are retrieved from healthy subjects after application of relatively low doses. The data indicated generally deals with the terminal elimination half-life which most of the time is higher than the half-life of the intended biological effect (see annotations).

Table: Therapeutic ('normal'), toxic, and comatose-fatal blood-plasma/serum concentrations (µg/mL) in man

Substance	Blood-plasma/serum concentration (µg/ml)			t _{1/2} (h)	Ref.
	Therapeutic ('normal')	toxic (from)	comatose-fatal (from)		
Acamprosate	appr. 0.37–0.65 ²³¹			13–20 ²³²	[155, 444]
Acebutolol	0.2–2 (0.5–1.255)		15–20	3–11	[440, 466]
N-Acetylacetolol ¹	1–2.5		90–150	9–14	[466]
Accainide	see (N-Acetyl-) Procainamide				
Acecarbromal(um)	10–20 (sum)	25–30		?	
Acemetacin	see Indomet(h)acin				
Acenocoumarol	0.03–0.1 ¹⁹⁷	0.1–0.15		3–11	[155, 340, 527, 528]
Acetaldehyde	0–30	100–125			[527, 528]
Acetaminophen	see Paracetamol				
Acetazolamide	(4–)10–20 ²⁶⁷	25–30		2–6	[155, 468, 469, 528]
Acetohexamide	20–70	500		1.3	[423]
Acetone	(2–)5–20	100–400; 2000 ⁸	550	(6–)8–31	[528, 545, 573]
Acetonitrile			0.77		[528]
Acetyldigoxin ³	0.0005–0.0008	0.0025–0.003	0.005	40–70	[420, 516]
Acetylsalicylic acid (ASS, ASA) ²	20–200	300–350	(400–)500	3–20 ³⁷	[77, 207, 234, 329, 334, 409, 548]
Acitretin	appr. 0.01–0.05 ¹¹²			2–4 ⁶	[291, 488]
Acyclovir	(0.4–0.63) 0.5–1.5 ²⁰³			2–5 ⁸³	[148, 155, 358, 476, 527]
Adipidone-Meglumine	850–1200			0.5	[489]
Äthanol	see Ethanol			– ¹³⁹	
Ajmaline	(0.1–) 0.53–2.21 (?)		5.5 ⁸	1.3–1.6, 5–6	[155, 426]
Albendazole	0.5–1.5 ⁹²			8–9 ⁹²	[104, 333, 348, 572]
Albuterol	see Salbutamol				
Alcuronium	0.3–3			3.3±1.3	
Aldrin	–0.0015	0.0035			[528]
Alendronate	<0.005			– ⁶	[411]
Alfentanil	0.03–0.6 ⁴			0.6–2.3 ⁹⁶	[299, 327, 462, 541]
Alfuzosine	0.003–0.06			3–9	[423]
Alimemazine (Trimeprazine)	0.05–0.4	0.5	1–3.2	8	[114, 428]
Alizapride	0.1–2			2–3	[423]
Allobarbitol	2–5	10	20	40–48	
Allopurinol	2–19			0.5–3	[133, 528]
Alphaprodine	0.87–1			1.6–2.6	[528]
Alprazolam	0.005–0.05 (–0.08) ⁶⁵	0.1–0.4	25 ²	6–20	[114, 155, 272, 286, 293, 301, 341]
Alprenolol ⁴⁸	0.025–0.14	1–2	40–48	2–7	[466]
Aluminium	<0.005 ²³⁴	0.05–0.15	4.4 ⁸	appr. 0.5	[133, 371, 429, 528]
Amantadine	0.2–0.6 (–1)	1; 2.4 ⁸	21 ⁸	9–15	
Amfebutamone	see Bupropion				
Amikacin ⁷⁶	10–25	30		2–3	[71]
Aminobenzoic acid	300–600	600			[429]
Aminoglutethimide	0.5–25			13.3 ± 2.65	[133, 155, 528]

Table (continued)

Substance	Blood-plasma/serum concentration (µg/ml)			t _{1/2} (h)	Ref.
	Therapeutic ('normal')	toxic (from)	comatose-fatal (from)		
Aminophenazone	10–20			appr. 2–4	[423]
4-Aminopyridine (Fampridine)	0.025–0.075	0.14 ⁸ ; 0.2		3–3.5	[503, 527, 528]
5-Aminosalicylic acid (5-AS, 5-ASA)	see Mesalazine				
Amiodarone ²⁶¹	(0.5–) 1–2 (–2.5)	2.5–3		30–120 ⁶	[54, 133, 155, 449]
Amisulpride	–0.4			12–18	[423]
Amitriptyline ^{7, 48}	0.05–0.3	0.5–0.6	1.5–2	30–50	[45, 57, 114, 121, 151, 181, 304, 305, 345, 415]
Amlodipine	0.005–0.015 (0.003–0.011)	0.088 ^{8, 165}	0.1–0.2 ^{8, 166}	34–50	[268, 275, 492]
Ammonia	0.5–1.7				[528]
Amobarbital	1–5	5–6	10	15–30	
Amodiaquine	–0.05 ²⁷⁰			– ²⁷⁰	[133, 510]
Amoxapine	0.18–0.6 ¹⁵¹	3	5	8	[340]
Amoxicillin	0.5–1 (5–15)			1–2	[423]
Amphetamine	0.02–0.1	0.2	0.5–1	4–8	[201, 429]
Amphotericin B	(0.1–) 0.2–3	(3–) 5–10		24–48 ¹¹⁰	[79, 192, 310]
Ampicillin	0.02–2 (2–20)			1	[71]
Amrinone	1–2(–4)			3–12	[155, 200, 269]
Amsacrine	0.1–0.5 (0.15–5.5)			5–7	
Anileridine	<0.5		0.9 ⁸	?	[528]
Aniline	appr. –1 (urine)		6		[133, 528]
Antimony	–0.01	0.2			[133]
Antipyrine	see Phenazone				
Apomorphine	0.002–0.02 ²⁰⁴			appr. 0.75	[155, 527]
Aprindine ⁴⁸	1–2	2–3		13–50	
Aprobarbital	4–20	30–40	50	14–34	
Arsenic	0.002–0.07	0.05–0.25	9–15		[133, 528]
Articaine	<1.5–2 (?)			0.3 (–1)	[379]
Ascorbic acid (Vitamin C)	4–15	?		– ⁶	[39, 155, 241, 321, 546]
Astemizole	0.002–0.05 ⁴³	14 ⁸		appr. 20 ^{6, 42, 43}	[28, 155, 487a]
Atenolol	0.1–1 (–2) ⁷⁷	2–3	27 ⁸	4–14 ⁹	[155, 426, 466, 504]
Atovaquone	13.9 ± 6.9 (>15)			2–3 ⁶	[490]
Atracurium(besylate)	0.1–0.5 (–5)			appr. 0.5	
Atropine	0.002–0.025 ¹⁵⁵	0.03–0.1	0.2	2–6.5, 13–38	[429, 524, 528]
Azapropazone (Apazone)	40–80			8–24	
Azathioprine ¹⁰	–2			1–4 ¹¹	
Azelastine	0.002–0.003(–0.01)			22–25	[423]
Azithromycin	appr. 0.04–1			50–60 (2–4 ⁶)	[17, 312, 402, 436, 470]
Aztreonam	1–10 (50–250)			1.5–2	[528]
Baclofen	0.08–0.4(–0.6)	1.1–3.5	6–9.6	6.8 ± 0.7	[28, 340, 528]
Bambuterol	see Terbutaline			10	
Barbital	2–20	20–50	50	57–120	
Barium	–0.001				[133]
Bendrofluazide	0.05–0.1			appr. 3	[426]
Benoxapofen	–50			19–39	[133, 155]
Benperidol	appr. –0.002			4–8	[423]
Benzbromarone	2–10			2–4	
Benzene	–0.0002 ²⁷¹		0.95		[528]
Benzphetamine	0.025–0.5	0.5	14 ⁸	?	[28, 528]
Benztropine	0.01–0.18	0.05	0.2–0.7	?	[423, 528]
Benzyl alcohol	?	18 ^{8, 194}		– ¹⁹⁵	[155, 210, 314]
Benzylpenicillin	1.2–12			1	[71, 489]
Bepidil	0.6–2.5			33–42	[178]
Beryllium	–0.0003				[133]

Table (continued)

Substance	Blood-plasma/serum concentration (µg/ml)			t _{1/2} (h)	Ref.
	Therapeutic ('normal')	toxic (from)	comatose-fatal (from)		
Betacarotene	4–6 ¹⁹⁶	?			[155, 168]
Betaxolol	0.005–0.05		36 ⁸	14–22	[28, 34a, 466]
Bethanidine	0.02–0.5			9–10	[155, 528]
Bevantolol	0.2–2			2	[423]
Bezafibrate	–15			2	[133, 155]
Bicalutamide	1.5–17.5 (–25) ¹⁶³			(3–) 7–10 ⁶	[325]
Biperiden	0.05–0.1		0.25 ⁸	18–24	[114]
Bismut(h)	<0.05 (–0.1)	0.05–0.1		– ⁶	
Bisoprolol	0.01–0.1			10–12	[466]
Bopindolol	0.001–0.015 ⁵⁴			4–8 ⁵⁴	[466]
Borate	0–7	20	200		[429]
Boron	0.8–6	20–50	50–150		[528]
Brallobarbital (Brallobarbitone)	4–8	8–10	15	20–40	
Bretylium	0.8–2.4			6–11	[155]
Brodifacoum		0.02	0.03–0.17; acute: 3.9 ⁸	20–60 ⁶	[391a, 528]
Bromadiolon		0.02			[528]
Bromazepam	(0.05–) 0.08–0.2	0.3–0.4	(1–) 2	8–22	[272]
Bromide	10–50	500–1500; 3000 ^{8, 242}	2000	12–13 ⁶	[186, 213, 497, 528]
Bromisoval	10–20	30–40		appr. 4 ^{28, 105}	
Bromoxynil		20			[133]
Bromperidol	0.001–0.02			20–36	
Brompheniramine	0.005–0.015	0.2 ⁸		2–10 (–20)	[423]
Brotizolam	0.001–0.02		10 ⁸	4–10	[28, 443a]
Budipine	appr. 0.1–0.3			30	[423]
Buflomedil	appr. 0.2–0.5 (–1.0)	15–25	25–50; 275 ⁸	2–4	[426, 528]
Bunitrolol	0.001–0.015			2–6	[466]
Bupivacaine	(0.25–) 0.5–1.5 (–2)	2–4		0.5–3	[155, 202, 260, 300]
Bupranolol	– ⁴⁴			2–4	[466]
Buprenorphine	0.0005–0.005 (–0.01)	0.2 (?)	1.1 ⁸ ; 4–13	3–5	[28, 133, 155, 520a, 544]
Bupropion (Amfebutamone)	0.01–0.02; 0.05–0.1 ¹⁵²	1.2 ²⁴⁶	7.3	10–20	[28, 132, 148a, 214, 222, 287, 305, 412, 509]
Buspirone	0.001–0.004 (–0.01)			2–3	[528]
Butabarbital	see Secbutabarbital				
Butalbital	1–5	10–15	15–30	30–40	
Butanone	–10	500			[133]
Butaperazine	0.02–0.3(–0.7)			12	[423]
Butorphanol	0.0006–0.002			4–9	[423]
Butriptyline	0.07–0.15	0.4–0.5		?	[423]
Cadmium	–0.0065	0.015–0.05			[133, 528]
Caffeine (Coffein)	(2–) 4–10	15–20	180	2–10	[28, 82, 155, 350, 433]
Calcifediol	0.01–0.05				[429]
Camazepam	0.1–0.6	2		20–24	[272]
Camphor		0.3–0.4	1.7	?	[423]
Candesartan	0.08–0.18			5–7	[423]
Canrenone	see Spironolactone				
Captopril	0.05–0.5 (–1)	5–6	60	1–2	[4, 268, 426]
Carazolol ²³	–0.015			9	[466]
Carbamazepine ¹²	2–8 (4–12)	10	20	12–60 (7–35) ¹⁴⁰	[60, 81, 114, 124, 145, 258, 311]
Carbaryl		5	6		[28, 114a]
Carbenoxolone	appr. 5–30			8–20	[429]
Carbimazole ⁹⁵	0.5–3.4 ⁹⁵			3–5 ⁹⁵	
Carbinoxamine	appr. 0.02–0.04			appr. 10–15	[502]

Table (continued)

Substance	Blood-plasma/serum concentration (µg/ml)			t _{1/2} (h)	Ref.
	Therapeutic ('normal')	toxic (from)	comatose-fatal (from)		
Carboc(h)romene	0.8–2.4			0.2–1.5	
Carbon monoxide	– ²⁰⁰	25–30%	50–60%		[155, 527, 528]
Carbon tetrachloride	–0.07	7.1 ⁸ , 269 ; 20–50	100–200		[458, 528]
Carboplatin	max. 10–25			2.5–6 ¹⁰⁶	
Carbromal(um) ¹³	2–10	15–20	40	7–15	
Carisoprodol	10–30	40	50 ⁸ , 104	8	[114, 528]
β-Carotene	see Betacarotene				
Carteolol	0.01–0.1			3–7	[466]
Carvedilol	appr. 0.02–0.15 (–0.3)			6–10	[155, 269]
Cefaclor	13–35 (i.v. –900)			0.5–1	[155, 528]
Cefalexin	–65			1–1.5	[489]
Cefaloridine	20–80			1.5	[489]
Cefamandole	1–5 (10–40–150)			0.5–1.2	[489, 528]
Cefazolin	–150			1.5–2	[71, 489]
Cefoperazone	–250			1–2 (–5)	[88]
Cefotaxime	0.5–2 (10–50, i.v. –225)			1–1.5	[71]
Cefotetan	65–90			3.5	[489]
Cefotiam	–150 ⁷¹			0.7–1.5 (–2)	[464, 489]
Cefoxitin	–150			0.7–1	[489]
Cefsulodin	20–100			1.6–1.9	[155, 528]
Ceftazidime	20–40 (50–200)			1.6–2	[155, 528]
Ceftibuten	appr. 3–20			2–4	
Ceftizoxime	40–160			6–9	[489]
Ceftriaxone	15–75			6.5–8.5	[71]
Cefuroxime	0.5–1 (–180) ; 7–59 ²⁴³			1.1–1.3	[155, 315, 392, 527, 528]
Celiprolol	0.05–0.5			3–6	
Cephalothin (Cefalotin)	–30			0.5–0.6	[155, 489]
Cerivastatin	0.002–0.04			1.5–3	[423]
Cetirizine	appr. 0.02–0.3	2–5		7–9	[28, 423]
Chinidine	see Quinidine				
Chinine	see Quinine				
Chloralhydrate ¹⁴	1.5–15	40–50	60–100	8–30	
Chlorambucil	0.15–0.3 (–1.0)			1.5–3	[423]
Chloramphenicol	5–10 (–15) ⁵⁹	25		2–6	[277, 528]
Chlordane	–0.001	0.0025	1–7		[133, 528]
Chlordecone		0.5			[133]
Chlordiazepoxide ¹⁵	0.4–3	3.5–10	20	6–24	[18, 28, 114, 528]
Chlormethiazole	see Clomethiazole				
Chlormezanone	(3–) 5–9 (–14)	appr. 20	18 ⁸ ; 53 ⁸	20–30	[104, 114, 279]
Chlorobutanol	?	75			[429]
Chloroform	20–50	70–250	390		[528]
Chlorophacinone		0.1			[133]
Chloroquine	0.02–0.5	1	3	dose-dependent ⁶	[83, 114, 234]
Chlorothiazide	appr. 6			0.5–2	[155, 528]
Chlorphen(ir)amine	0.003–0.017		1.1 ⁸	15–25	[28, 133, 155, 528]
Chlorpromazine ⁶⁶	0.03–0.1 (–0.5)	1–2	3–4	10–30	[114, 155, 245, 346]
Chlorpropamide	30–150	200–750		25–60	[429, 528]
Chlorprothixene	0.02–0.2	0.4	0.8	10–30	
Chlorpyrifos		0.2		27	[28, 133]
Chlortalidone	0.15–0.3 (–1.4)	appr. 2		44–48 (35–70)	
Chlortetracycline	1–5 (–10)	30		5–6	[340, 468, 469]
Chromium	–0.00035		32 ⁸		[28, 133]
Cibenzoline	0.2–0.4 (–0.9)	(0.5–) 1		7–8 ⁸³	[155, 537]
Cicletanine	appr. 1–2			5–23	[155, 423]
Ciclosporine	see Cyclosporine				
Cidofovir	appr. 7–43			2.5	[155, 423]

Table (continued)

Substance	Blood-plasma/serum concentration (µg/ml)			t _{1/2} (h)	Ref.
	Therapeutic ('normal')	toxic (from)	comatose-fatal (from)		
Cilazapril(-)at	0.003–0.09			30–50	[423]
Cimetidine	0.25–3 (0.75–4)	30–50	110 ⁸	1.5–4	[172, 477]
Cinoxacin	appr. 15			1.5–4	
Ciprofloxacin	2.5–4	11.5 ⁸		3–6	[80, 93, 454, 494]
Cisaprid	0.04–0.08			6–12	[423]
Citalopram	appr. 0.01–0.2 (– 0.1?)		5–6 ¹⁶⁰	appr. 33 ¹⁷⁰	[173, 188, 242, 380, 386–388, 423]
Cladribine	appr. 0.006			0.1–0.2 (6.4–19.7)	[36, 248, 261]
Clarithromycin	appr. 0.2–2			3–7 ²¹⁷	[17, 53, 423, 436, 437, 463]
Clemastine	appr. 0.001–0.002 (?)			appr. 8	[56, 423]
Clenbuterol	0.0003–0.0006	0.003 ⁸		34–35	[28]
Clindamycin	appr. 0.5			2–3	
Clobazam ¹⁷	0.1–0.4			10–32	[272, 274]
Clobutinol	appr. 0.05–0.2			23–34	[155, 423]
Clofibrate	50–250			10–18	
Clomethiazole (Chlormethiazole)	0.7–2	(2.8–) 4–15	50	3–7	[155, 273, 340, 468, 532]
Clomipramine ^{48, 85}	(0.02–) 0.09–0.25 (–0.4) ²²⁶	0.4–0.6	1–2	20–26 ⁸⁶	[20, 87, 131, 151, 156, 285, 305]
Clonazepam	(0.004–) 0.01–0.08 ¹⁵⁰	0.1		20–60	[60, 286, 431]
Clonidine	0.001–0.002 (–0.004)	0.025–0.05 (0.009 ⁸)	0.23 ⁸	8–25	[28, 127, 367, 417]
Clopenthixol	0.002–0.015	0.05–0.1		15–25	[423, 528]
Clorazepate ¹⁵	see Nordazepam			1–2	[145]
Clotiazepam	0.1–0.7			3–15	
Cloxacillin	5–30 (–85)			0.5–1 (0.3–2)	
Clozapine ¹³⁶	(0.1–) 0.3–0.6 (>0.35 ?)	0.6–1 (9.5 ⁸)	1.2 ⁸ ; 2 ⁸ ; 5.2 ⁸	6–14	[85, 134, 174, 326, 571]
Cobalt	0.0001–0.0022				[133, 528]
Cocaine	0.05–0.3	0.5–1	4	0.5–1 ¹⁸	[28, 65, 133, 397, 468, 469, 528]
Codeine ⁴⁸	0.03–0.25	0.5–1	1.8	3–4	[155, 484]
Coffein(e)	see Caffeine				
Colchicine	0.0003–0.0025	0.005	0.024 ⁸	11–32 ¹⁴³	[29, 435, 527]
Colistin	1–5			2–5	
Copper	0.6–1.5	2	5		[133, 429]
Cotrimoxazole	see Sulfamethoxazole and Trimethoprim				
Cresol (Methylphenols)		appr. 50	120		[133, 528]
Cromolyn (Cromoglycate)	appr. –0.01			1–1.5	[133, 155]
Cyanide	– ¹⁷⁷	0.5	1–3	appr. 19 ¹⁸⁴	[30, 155, 179, 220, 434, 446, 497, 505]
Cyclizine	0.1–0.25	0.75–1	15	24	[133, 528]
Cyclobarbitol	2–6	10	20	8–17	
Cyclobenzaprine	appr. 0.003–0.04	0.4		18 (9–40) ²⁵³	[133, 528, 565]
Cyclohexane	–0.4				[133]
Cyclophosphamide	10–25			4–8 (1.3–16)	[155, 423]
Cyclopropane	80–180				[133, 528]
Cyclosporine A (CsA)	<0.1–0.15–0.25	0.3–0.4 ¹⁶		10–27 ¹⁶⁹	[116, 219, 306, 307, 377, 520]
Cyproheptadine	appr. –0.05		0.47 ⁸	appr. 16	[28, 133, 155]
Cyproterone acetate	?			30–40	[325]
Cytarabine	0.05–0.5			0.1–0.2 (1.9–2.5)	[248, 340]
2,4-D	see 2,4-Dichloro-phenoxyacetic acid				
Danazol	appr. –0.2			4.5	[133, 155]
Dantrolene	(0.1–) 0.4–1.5 (–3)			4–12	[155, 340, 534]

REVIEW

Table (continued)

Substance	Blood-plasma/serum concentration (µg/ml)			t _{1/2} (h)	Ref.
	Therapeutic ('normal')	toxic (from)	comatose-fatal (from)		
Dapsone ⁴⁸	0.5–2	10	18 ⁸	25–31	[280, 406]
Deferoxamine (Desferrioxamine)	3–15			4–6	
Demoxepam	0.5–0.74	1	2.7		[429]
Desipramine ^{48, 69}	0.01–0.5 (0.12–0.25)	0.5–1	3	15–25 ⁷⁰	[57, 69, 304, 305, 356]
Desmethyldiazepam	see Nordazepam			40–80	[272]
Dexamethasone	appr. 0.05–0.265 ²⁴⁷			2.5–9.5	[155, 432]
Dexfenfluramine	appr. 0.03–0.06	0.15–0.25		appr. 18	[429, 528]
Dextromethorphan ⁴⁸	0.01–0.04	0.1	3	2–4	[195, 427]
Dextromoramide	0.075–0.15	0.2	0.9	0.1–1.5 (?)	[28, 266a, 423, 526, 528]
Dextropropoxyphene	0.05–0.3 (–0.5)	1	1–2	10–30	[234]
3,4-Diaminopyridin (DAP)	<0.04 ²¹³	0.1 (?)		0.3–2 ²¹⁴	[37]
Diazepam ¹⁹	0.2–2 (–2.5)	3–5		24–48	[65, 107, 155, 272, 431, 468, 469, 521]
Diazinon		0.05–0.1 (–0.5)			[133, 528]
Diazoxide	10–20 (–50)	50 (–100)		20–36 (–48)	[155, 268, 426, 527, 528]
Dibenzepine	0.025–0.15 (0.1–0.5)	3	18	3.5–5	[133, 528]
Dichloromethane		200	280		[133]
2,4-Dichlorophenoxyacetic acid (2,4-D)	–	appr. 100	200; 392 ⁸ ; 720 ⁸	appr. 18 ¹⁸²	[155, 528]
Dichlorvos			29	0.16	[28]
Diclofenac	0.5–3	50; 60 ⁸		1–2	[92, 133, 141, 142]
Dicoumarol	8–30	50–70		1–4 ⁶	[133, 528]
Dicyclomine (Dicycloverin)	–0.1	appr. 0.2	0.5	1.8–2	[133, 423]
Didanosine	appr. 1–30 µmol/l			1	[66, 67, 155, 358]
Dieldrin	–0.0015	0.15–0.3			[28, 133, 528]
Diethylcarbazine	>0.8–1.0			4–15	[47]
Diethylpentenamide (Valdetamide)	2–10	20	45	6–7	
Diethylpropion	0.003–0.007 (–0.2)	2	5.4 ⁸	4–8 ²³	[133, 155, 423, 528]
Difenacoum		0.5			[133]
Diflunisal	40–100 (–200)	300–500	600	5–12 ⁸³	[133, 155, 340, 528, 556]
Digitoxin	0.01–0.025	0.03	0.04	140–200	[109, 171]
Digoxin	0.0005–0.0008 (–0.002)	0.0025–0.003	0.005	40–70	[108, 120, 217, 251, 357, 420, 516, 529, 550]
Dihydralazine	see Hydralazine				
Dihydrocodeine	0.03–0.25	0.5–1	2	3–4	[133, 469, 528]
Dihydroergotamine	0.001–0.01			7–9	[133, 155]
Diltiazem	0.03–0.13 (–0.25) ¹⁵⁷	0.8–1	2–6; 7 ⁸ ; 8 ⁸	2–6 (4–9)	[133, 155, 268, 528]
Dimenhydrinate	see Diphenhydramine				
Dimethadione	700–1000	1000		?	[133, 155, 528]
Dimethindene	0.01–0.05			appr. 6	[155, 423]
N,N-Dimethyltryptamine	0.001–0.1				[528]
4,6-Dinitro–2-methylphenol		40			[133]
Dinitro-o-cresol (DNOC)	1–5	30–60	75		[528]
Diphenhydramine	0.05–0.1 (–1)	1–2 (–4)	5–10	4–10, 20–60	[86, 235, 524, 528]
Diphenoxylate	appr. 0.01			2–3	
Dipipanone	appr. –0.05	0.2		?	[133]
Diprophylline	see Dyphylline				
Dipyridamole	0.1–1.5	4		11–13	[340, 468, 469]
Dipyron	see Metamizole				
Diquat		0.1–0.4			[133, 528]
Disopyramide	2–7 ⁷⁸	8		5–8	[133, 528]
Disulfiram	0.05–0.4	5	8	appr. 5–7	
Dixyrazine	appr. 0.3 ²⁴⁹		5.5 ⁸ ; 9.4 ⁸		[383]

REVIEW

Table (continued)

Substance	Blood-plasma/serum concentration (µg/ml)			t _{1/2} (h)	Ref.
	Therapeutic ('normal')	toxic (from)	comatose-fatal (from)		
Domperidone	appr. 0.01–0.1			12–16	[24, 155, 208, 223, 343]
Donepezil ²⁰⁷	appr. 0.03–0.075			70–100	[230, 438]
Dothiepin (Dosulepin) ²⁰	0.02–0.1	0.8	1	11–40	[265, 467]
Doxacurium	0.01–0.3			1–2 ⁸³	
Doxapram	(1.5–) 2–5	9 ²⁶⁸		2.4–9.9	[22, 133, 155, 528]
Doxazosin	0.01–0.15			10–22	[269]
Doxepin ²¹	0.01–0.2 (0.03–0.1)	0.5–1	2–4	8–25	[8, 45, 126, 181, 282, 305, 356]
Doxorubicin (Adriamycin)	0.006–0.02			20–48	[133, 155, 528]
Doxycycline	1–5 (–10)	30		7–20	
Doxylamine	0.05–0.2	1–2	5	9–11	
Dronabinol (Delta-9-tetrahydrocannabinol, THC)	0.005–0.01 (–0.05) ¹³⁷			50–100	[65, 246, 382]
Droperidol	appr. –0.05			1.5–2.5 ²³⁷	[133, 155, 450]
Dyphylline	6.5–14 (–20)	40		2	[133, 528]
Edrophonium	–0.15	appr. 0.15		1.3–2.4	[9, 155, 528]
Emetine	appr. –0.1	0.5		?	[133]
Enalapril ⁵²	0.01–0.05 (–0.1)			8–11	[4, 268]
Encainide ⁴⁸	– ¹⁷⁵			1.5–3.5 ¹⁷⁶	[155]
Endrin	–0.003	0.01–0.03			[133, 528]
Enoxacin	1–4			3–6	[93]
Enoximone	≥0.2			4–7	[155, 269]
Entacapone	0.4–1.0 (–7.0)			1.5–3.5	[155, 423]
Ephedrine	0.02–0.2	1	5 ⁸	3–11	[133, 428, 528]
Epirubicin	0.01–0.05			24–52	
Eprosartan	0.4–1.0 (–1.85)			5–9	[155, 423]
Erythromycin	2–6 (–8)	12–15		1–3	[133, 528]
Esmolol	0.15–2			4–16 min	[466]
Estazolam	0.055–0.2			10–24	[133, 155, 528]
Et(h)amsylate	15–20			2.5–4	
Ethacrynic acid	0.05–0.1			1–4	[155, 340]
Ethambutol	0.5–6	10		2.5–3.5	[236, 528]
Ethanol		1000–2000	3500–4000	– ¹³⁹	
Ethchlorvynol	0.5–8	20	50	10–25 (–35)	[133, 155, 528]
Ethinamate	1.5–10	50–100	200 ⁸	appr. 2	
Ethosuximide	30–100 (40–60)	150–200	250	30–60	[60, 145]
Ethylene glycol		200–500	2000		[429]
Etidocaine	0.5–1.5	1.6–2		2–3	[557]
Etilefrine	appr. 0.06			2–3.5	
Etodolac	>14 ²²⁹			6–8	[51, 155, 423]
Etomidate	0.1–0.5 (–1)			3.9 ± 1.1 (2–11)	[155, 340]
Etoposide	1–6			4–11	[133, 155, 528]
Ezetimibe	>0.015			appr. 30	[129, 130]
Famotidine	0.02–0.2	0.42 ⁸		2–4.5	[13, 155, 570]
Fampridine	see 4-Aminopyridine				
Felbamate	50–110 ¹⁶⁴	200 (?)		20–24	[167, 522, 542]
Felbinac	appr. 0.4–1 (topical)			10–17	[48, 155]
Felodipine	0.001–0.012	0.01		22–27 ⁸⁸	[43, 268, 423]
Fenbufen	appr. –60			10–12	[133, 155]
Fendiline	0.02–0.15			appr. 20	
Fenfluramine	0.04–0.3	0.5–0.7	6	1–2, 18–25	
Fenitrothion			1.1		[28]
Fenofibrate	5–30 ²⁴¹			20–22	[155, 313]
Fenoldopam	0.003–0.06			0.1	[423]
Fenopropfen	(25–) 30–60			2–3	[206]
Fenoterol	(0.001–) 0.01–0.04			appr. 7	

Table (continued)

Substance	Blood-plasma/serum concentration (µg/ml)			t _{1/2} (h)	Ref.
	Therapeutic ('normal')	toxic (from)	comatose-fatal (from)		
Fentanyl	0.003–0.3 ⁴		0.003–0.02 ^{8,103}	1–3.5 (transdermal patch: appr. 17)	[13, 28, 226, 297, 299, 403, 462, 482, 486, 493, 569]
Fexofenadine	appr. –0.3 ¹⁹¹			14–18	[423, 478]
Finasteride	0.008–0.01			5–7	[499]
Flecainide ⁴⁸	(0.2–) 0.4–0.8	1–2	2.6 ⁸ ; 13 ⁸	10–20	[128]
Fleroxacin	1–4			8–13	
Flucloxacillin	3–30			0.7–1.5	
Fluconazole	appr. 1–5 (–15)	20; 95 ⁸		22–31 ⁸³	[98, 430, 461, 528]
Flucytosine	35–70 (20–50)	100		3–5	[192]
Flumazenil ²²	(0.01–) 0.02–0.1	0.5		1–2	
Flunarizine	0.025–0.2	0.3		– ⁶	[426]
Flunitrazepam ²³	0.005–0.015	0.05		10–20	[49, 114, 272]
Fluoride	0.095–0.190 (–0.285) ³⁹	2	3	short	[155, 391, 407, 497, 527, 528, 552]
5-Fluorouracil	0.05–0.3	0.4–0.6		<0.5	[133, 155, 528]
Fluoxetine	appr. 0.16–0.5	1	6 ⁸	2–4 ^{6, 130}	[69, 121, 188, 204, 356, 425]
Flupentixol	0.0005–0.002			19–39	
Fluphenazine	0.0002–0.004	0.05–0.1		10–18 ⁴⁵	
Flupirtine	0.5–1.5	appr. 3–4		7–11	[368]
Flurazepam ²⁴	0.02–0.1	0.2–0.5	0.8; 24 ⁸	appr. 2 ²⁴	
Flurbiprofen	5–15			3–4	[138]
Flutamide ⁶⁰	0.4–1.5 ⁶⁰			7–20 ⁶⁰	[104, 465]
Fluvoxamine	appr. (0.05–) 0.15–0.25	0.65	2.8 ⁸	15–22	[28, 170, 188]
Furosemide (Frusemide)	1–6	25–30		1–3	[133, 155, 528]
Fusidinic acid	30–200			4–6	
Gabapentin	5.9–21 ¹⁸⁵	85 ⁸		5–8 ¹⁸⁶	[28, 44, 64, 400, 483, 500, 519, 562]
Galant(h)amine	appr. 0.03–0.14 (?)			6–8	[38, 474]
Gallopamil	0.02–0.1		8 ⁸	3–8	[146, 268]
Gamma-hydroxybutyric acid (gamma-hydroxybutyrate, gamma-butyrolactone, GHB, liquid ecstasy)	see 4-Hydroxybutyrate				
Ganciclovir	(0.29–0.51) 0.5–5 ¹⁰⁷	3–5		2–4 ⁸³	[252, 358, 476]
Gemcitabine	15–20 µmol/l ¹⁴⁶	– ¹⁹²		0.05 (0.18–0.43)	[248]
Gemfibrozil	appr. –25			1.5	[133, 155]
Gentamicin	(2–) 4–10 ²³³	12		1.5–6	[58, 71, 119, 120, 231, 278, 353, 547]
Glibenclamide (Glyburide)	0.05–0.2	0.6		10	
Glipizide	0.1–1.0 (–1.5)	2		3–7	[429]
Glutethimide	0.2–5	10–30	20–50	5–20	[234]
Glyburide	see Glibenclamide				
Glyceryl trinitrate	see Nitroglycerin				
Gold	3–8	10–15			[528]
Granisetron	0.009–0.017 (?)			3–14	[155, 423]
Griseofulvin	0.3–1.3			22	
Guaifenesin	appr. 0.3–1.4			appr. 1	[155, 423]
Guanethidine	0.01			5–10 ⁶	[133, 155, 528]
Halazepam ¹⁵	see Nordazepam			30–40	
Haloperidol	0.005–0.017 (0.001–0.02)	0.05–0.5	0.5; 0.18 ^{8, 74}	10–35 ¹⁵³	[104, 288, 346, 413, 520, 530, 531, 571]
Hematin	50–100			?	
Hemin	see Hematin				
Heptabarb(ital)	0.5–4	8–15	20	6–11	
Heptaminol	appr. 0.2–1 (–1.5)			2–3	
Hexachlorophene	0.003–0.65 (–1)		35	6–44	[133, 528]

Table (continued)

Substance	Blood-plasma/serum concentration (µg/ml)			t _{1/2} (h)	Ref.
	Therapeutic ('normal')	toxic (from)	comatose-fatal (from)		
n-Hexane	-0.01				[133]
Hexapropymate	2-5	10-20		?	[528]
Hexobarbital	1-5	10-20	50	4-6	
Hirudin-rec	_171	_171		(1-) 2.5-3	[76, 104, 155]
Hydralazine ⁵	0.05-0.5 (-1.5)			2-6	[268]
Hydrochlorothiazide	appr. 0.04-2			10-12	[155, 426]
Hydrocodone	0.01-0.05	0.1	0.2	appr. 4	[423]
Hydromorphone	appr. 0.005-0.015	0.1	0.2	2-3	[176, 340, 423, 427]
4-Hydroxybutyrate (GHB)	appr. 50-120 ⁴	80 (abuse)	250-280 (abuse)	0.3-0.5 (-1)	[28, 133, 155, 335a, 423]
Hydroxychloroquine	-0.1 (-0.4)	0.5-0.8	4	dose-dependent ⁶	[133, 155, 284, 468, 469]
Hydroxyzine	0.05-0.1	0.1	39 ⁸	7-20	[114, 528]
Ibuprofen	15-30	200		2-3	[28, 140, 206, 556]
Idebenone	0.05-0.2			16-22	[155, 405]
Iloprost	appr. 0.0001			appr. 0.5	
Imatinib	0.72 ²⁵⁸			appr. 18	[113, 320]
Imipenem	0.5-5 (20-75)			1	[513]
Imipramine ^{48, 125}	0.05-0.35	0.5-1	1.5-2	6-20 ²⁶	[8, 57, 126, 151, 181, 249, 304, 305]
Indinavir	_260	0.5		1.5-2	[53, 155, 421]
Indomet(h)acin	0.3-1 (-3)	4-5		3-11	[157]
Indoramin	appr. 0.025-0.1			12 (3.5-15)	[269]
Iproniazid	appr. -5 (?)			?	[133]
Iridium	-0.02				[133]
Iron	0.5-2	6	17		[133, 426, 528]
Isoniazid (INH)	5-10	20	(30-) 100	1-3	[155, 236, 423]
Isopropanol		200-400	1000		[28, 528]
Isosorbid mononitrate (ISMN)	0.1-1			2-5	[269]
Isotretinoin	appr. 0.001-0.002 (topical) ²²⁴			10-20	[155, 349, 375]
Isoxicam	5-15			20-50	
Isradipine	0.0005-0.002 (-0.01)	0.01	0.26 ^{8, 259}	5-10	[78, 155, 268, 439, 523]
Itraconazole	appr. 0.4-2 ¹¹¹			24-36	[25, 309, 366, 485]
Ivermectin	appr. 0.05 ⁵¹			16-28	[155, 384]
Kanamycin	1-4 (10-25)	25-30		0.5-3	
Ketamine	1-6	7 (abuse)	7 (abuse)	1-3	[28, 50a, 114, 191, 499a]
Ketanserin	0.05-0.5			10-22	
Ketazolam ¹⁵	0.001-0.02			1-3	[272]
Ketobemidone	appr. 0.3		0.6	2-2.5	[28, 50a, 155, 499a]
Ketoconazole	1-3 (-6)			6-10	[423]
Ketoprofen	1-6 (-20)		1100 ⁸	1.5-2 (-4)	[21, 28, 106, 206, 237, 302, 364]
Ketorolac	0.5-3	5		4-10	[155, 423]
Ketotifen	0.001-0.004	0.02	1.2 ⁸	21	[428]
Labetalol	0.03-0.18 (-0.65) ⁵⁰	1		3-10	[155, 269, 466]
Lacidipine	0.003-0.006			12-19	[423]
Lamivudine	_230			(3-) 5-7	[155, 247]
Lamotrigine	(1-5) 3-14	15-30	50 ⁸	24-36 ¹⁰⁹	[28, 64, 419, 453, 519]
Lead	-0.16 (-0.3)	0.4-0.6	3	-6, 180	[28, 133, 155, 452, 456]
Leflunomide ²⁵⁵	8.8 ± 2.9, 18 ± 9.6, 63 ± 36 ²⁵⁶			11 (4-28) ⁶	[32, 155, 163, 316]
Levetiracetam	10-37	400 ^{8, 264}		5-8	[27]
Levocabastine	<0.001-0.01 ¹⁴⁷			33-40	[209]

Table (continued)

Substance	Blood-plasma/serum concentration (µg/ml)			t _{1/2} (h)	Ref.
	Therapeutic ('normal')	toxic (from)	comatose-fatal (from)		
Levodopa (L-Dopa)	0.3–1.6		650 ⁸	1–3 ²¹⁵	[15, 182–184, 507]
Levomepromazine ²⁷	0.005–0.025 (–0.2)	0.4	0.5	15–30 ²⁸	
Levomethadone	0.04–0.3	1	0.2	10–40	[155, 451]
Levorphanol	0.007–0.02	0.1	2.7 ⁸	11–30	[423]
Levothyroxine	0.045–0.14 ⁴⁷			6–8 ⁶	[143]
Lidocaine (Lignocaine)	(1–) 1.5–5 ¹¹³	6–7	10	1–4 ¹¹³	[95, 189, 231, 557, 567]
Lisinopril	(0.005–) 0.02–0.07	0.5		12	[268]
Lithium	4–8 ⁷⁹	13	14	8–50 ²⁸	[5, 161, 305, 356, 361]
Lofepamine	0.003–0.01			10–20	
Loperamide	– ⁸⁴			7–15	
Loprazolam	0.003–0.01			11–20	[272]
Loratadine	0.001–0.02 ¹³⁸			8–14	[418, 575]
Lorazepam	(0.02–) 0.08–0.25	0.3–0.5		10–40	[203, 272, 424, 431]
Lorcainide	(0.04–) 0.1–0.4 (–0.9)			5–10	
Lormetazepam	0.005–0.025 (–0.1)			10–15	[272]
Losartan	<0.2 ²²⁷			1.5–2	[155]
Loxapine	0.01–0.03 (–0.1)	1	7.7	4 (1–14)	[133, 528]
Lysergide (lysergic acid diethyl amide, LSD)	0.0005–0.005	0.001	0.002–0.005	appr. 2–5	[317, 423, 528]
Magnesium	55–75 ¹²¹	120–140	150–180		[155, 558]
Malathione		0.5	175 ⁸		[28, 133]
Manganese	0.0005–0.0015				[133]
Maprotiline	0.1–0.6 (0.1–0.25)	0.5–1	1–5	20–60	
MCPA	see 2-Methyl–4-chloro-phenoxyacetic acid				
MCPP	see 2-Methyl–4-chloro-phenoxypropionic acid				
Mebendazole	≥0.1 ⁶⁷	appr. 0.6		2.8–9	[104]
Medazepam ³⁰	0.1–0.5 (–1)			2–5	
Mefenamic acid	2–10 (–20)	25		2–4	[340, 468, 469]
Mefloquine	0.4–1 ¹⁰⁸	1.5–2 ⁸		appr. 21 ⁶	[68, 199]
Melitracen	0.01–0.1			12–23	
Meloxicam	0.4–2			17–22	[373, 423]
Melperone	<0.2 ¹⁹		17.1 ⁸	4–8	[228, 423, 496a]
Melphalan	–1.5			1.5–2	
Meperidine	see Pethidine				
Mephesisin	3–10 (?)			appr. 2–4	[423]
Mepindolol	0.007–0.07			3–6	[466]
Mepivacaine	appr. 0.4 (–4)	5–6 (–10)	50	1–3	[423]
Meprobamate	5–10	10–25	30	6–17	[114]
Meptazinol	0.025–0.25			2–3	
Mercury	appr. 0.0015–0.002 (<0.005) ¹⁷⁸	0.05–0.2	0.5	appr. 3 ⁶	[133, 155, 372, 429, 481]
Mesalazine (Mesalamine)	–appr. 1 ¹¹⁹			0.5–2.4 ¹²⁰	[271]
Mesoridazine	0.15–1	3–5	3 ⁸ ; 4 ⁸ ; 16 ⁸	20	[423]
Mesuximide	see Methsuximide			1–2	[155]
Metaclazepam	0.05–0.2			7–23	[272]
Metamizole (Dipyrone) ⁵	10 ³²	20 ³²		6–8	[423]
Metformin	0.1–1 (0.6–1.3)	5–10	64 ⁸ ; 85 ⁸ ; 91 ⁸ ; 166 ⁸	2–4 (–10)	[101, 422]
Methadone ¹³⁵	(0.05–) 0.1–0.5 (–0.75)	0.2	0.4	23–25 (13–55)	[218, 232, 233, 457, 525]
Methamphetamine	0.01–0.05	0.2–1	10–40	6–9	[423]
Methanol	appr. –2	200	900		[133, 423, 528]
Methapyrilene	appr. 0.1	4			[133]
Methaqualone	1–3	3–5	5–10	10–40	

Table (continued)

Substance	Blood-plasma/serum concentration (µg/ml)			t _{1/2} (h)	Ref.
	Therapeutic ('normal')	toxic (from)	comatose-fatal (from)		
Methemoglobin	— ¹⁹⁹	25–30%	60–70%		[155, 527, 528]
Methimazole	0.5–2			2–28	[317, 423]
Methocarbamol	25–40 (–50)	250		0.9–2	[133, 155, 528]
Methohexital	(0.5–) 1–6 ⁵⁵			1–3	
Methomyl			28 (8–57)		[28]
Methotrexate	0.04-?	0.4		2–10	
Methotrimeprazine	see Levomepromazine				
Methoxsalen (8-Methoxy-psoralene)	0.025–0.1 (–0.2)	1			[155, 527]
Methsuximide (Mesuximide) ²²³	10–40	40–50		20–40	[155, 496, 528]
D-Methylamphetamine	–0.1	1			[133]
2-Methyl-4-chlorophenoxy-acetic acid (MCPA)	—	appr. 100	appr. 180	— ¹⁸⁷	[155, 459]
2-Methyl-4-chlorophenoxy-propionic acid (MCPA)	—	appr. 100	669 ⁸ ; 715 ^{8, 181}	17 ¹⁸³	[155]
Methyl-dopa	1–5	9 ⁸		1.5–3	[340, 468, 469]
Methylenedioxyamphetamine (MDA)	–0.4	1.5	2		[317, 423, 528]
Methylenedioxyethylamphetamine (MDEA)	0.2		1		[28]
3,4-Methylenedioxymethylamphetamine (XTC, MDMA)	0.1–0.35 ²³⁶	0.35–0.5	0.4	9–10	[75, 317, 423, 528]
Methylphenidate	0.01–0.06	0.5; 1 ⁸	2.3	2–7	[427]
4-Methylthioamphetamine (4-MTA, p-MTA)			2 ⁸ ; 4.2 ⁸ ; 7.4 ⁸		[46, 123, 410, 512, 549]
Methyprylon(e)	<10–20	12–75	50 (–100)	3–6, 9–11	
Metiamide	0.01–0.06			?	[528]
Metildigoxin ³	0.0005–0.0008	0.0025–0.003	0.005	40–70	[420, 516]
Metipranolol ³³	0.02–0.08			2–3.5	
Metoclopramide	0.05–0.15	0.2	4.4 ⁸	3–6	[429]
Metocurine	appr. –0.4			?	[133]
Metoprolol ⁴⁸	0.035–0.5	0.65 ⁸ ; 12–18	4.7 ⁸ ; 12 ⁸ ; 63 ⁸	3–6	[28, 155, 466]
Metrifonate	appr. 1.4–3.6			2–5	[423]
Metronidazole	3–10 (–20)	200 ⁸		6–10 (–14)	[423]
Mexiletine	(0.5–) 0.7–2	2.5	35 ⁸	5–26	[338]
Mianserin	0.01–0.15	0.5–5		8–19	[114]
Miconazole	appr. 1			24	
Midazolam	0.04–0.1 (–0.25) ¹³⁴	1–1.5		1.5–3 ⁴⁶	[16, 42, 227, 293, 431]
Mifepristone	— ²¹⁶			24–48 (20–54)	[196]
Milrinone	0.15–0.25	0.3		1–2	[155, 269, 426]
Minaprine	appr. –0.1			?	[133]
Minoxidil ¹⁴⁹	appr. 0.02–0.25	1.4 ⁸ ; 3.1 ⁸	2.7 ⁸	2.8–4.2	[28, 155, 268]
Mirtazapine	–0.3	1–2		20–40 ¹⁸⁸	[155, 501]
Mizolastine	appr. 0.2–0.8			8–17	[155, 423]
Moclobemide ¹⁴¹	appr. 0.5–1.5 (–3)	11 ¹⁶² ; 25–60		1–3	[150, 175, 239, 336, 363, 365]
Modafinil	appr. 2–3 ²⁵⁷			12–15	[201, 352]
Molindone	appr. –0.5			?	[133]
Molsidomine	0.002–0.01			1–2.5	[269]
Molybdenum	–0.005				[133]
Montelukast	appr. 0.05–0.3			3–6	[155, 423, 574]
Moricicine	appr. 0.12–1.27			6–13	[317, 423]
Morphine	0.01–0.1	0.1	0.1–4	1–4	[1, 65, 159, 253]
Moxonidine	0.001–0.002 (–0.004)			2–3	[155, 269]
Muromonab-CD3 (OKT 3)	appr. 0.7–1.3			appr. 18	
Mycophenolate mofetil	— ²¹¹			16–18 ²¹²	[33, 149, 225, 448]
Nabumetone	— ²⁰⁶			— ²⁰⁶	[155, 560]

Table (continued)

Substance	Blood-plasma/serum concentration (µg/ml)			t _{1/2} (h)	Ref.
	Therapeutic ('normal')	toxic (from)	comatose-fatal (from)		
Nadolol	0.01–0.25		1,3 ⁸	14–24	
Naftidrofuryl (Nafronyl)	<0.5			1–2	[133]
Nalbuphine	0.02–0.2			2.5–7	
Nalidixic acid	10–30	40–50		1 (–7)	[155, 340, 423]
Nalmefene	–0.1			8.5–11	[133, 155]
Naloxone	0.01–0.03			1–2	
Naltrexone	–0.05 ⁹⁹			4–10	
Naproxen	20–50 (–100)	200–400; 414 ⁸		10–20	[90, 206, 335, 556]
Naratriptan	appr. 0.01–0.05			5–6	[155, 423]
Nebivolol	<0.02 (–0.2)	0.48 ⁸		10 (8–27)	[155, 197, 211, 337]
Nedocromil	<0.025			1.5–3.3	[133, 155]
Nefazodone	appr. 0.01–0.3 (?) ²²⁰	5.5 ⁸ , 221		2–7 ²²²	[23, 94, 153, 155, 169, 262, 445]
Nefopam	0.01–0.1	4 ⁸	12 ⁸	3–8	
Neostigmine	appr. 0.001–0.01 ¹²⁷			0.4–1.3	[9, 74]
Netilmicin	1–12			2–3 ⁸⁰	
Nicardipine	0.07–0.1			7–12	[268]
Nickel	–0.003	0.005			[133, 528]
Nicotine ¹²³	0.005–0.02 (–0.03)	0.4 (–1)	5; 13.6 ⁸	1–4 ¹²⁴	[155, 255, 426]
Nicotinic acid	4–18			0.3–1	
Nifedipine	0.025–0.1	appr. 0.15–0.2	5.4 ⁸	2–5	[28, 268]
Niflumic acid	2–35			2–3	[423]
Nilvadipine	<0.01			11–20	[268]
Nimesulide	appr. 1–3 ²³⁵			2–7	[34, 155, 423]
Nimodipine	0.01–0.05			1–2 (8–9)	[268]
Nimustine	0.0002–0.0005			?	[528]
Nisoldipine	0.0003–0.001			7–12	[155, 268]
Nitrazepam	0.03–0.1	0.2–3	5 (?)	20–30	
Nitrendipine	0.01–0.05			8–12	[268]
Nitrofurantoin	1–3	3–4		1 ± 0.3	
Nitroglycerin (Glyceryl trinitrate)	appr. –0.015			20–30 min	[355]
Nitroprusside	see Thiocyanate	see also Cyanide			
Nizatidine	0.05–0.5 (–1.0)			0.7–2.1	
Nomifensine	0.01–0.1	8–10		2–5	
Nordazepam	0.02–0.2 (–0.8)	1.5–2		40–80	
Norephedrine	see Phenylpropanol-amine				
Norfenefrine	–0.4			2–3	
Norfloxacin	0.5–5			3–4	[155, 528]
Normesuximide ³¹	10–30	40		38	
Nortriptyline ⁴⁸	0.02–0.2 (0.05–0.15)	0.5	1–3	18–56 ⁶⁸	[151, 305, 345, 415]
Obidoxime	1–10 (appr. 10–15 µmol/l)				[133, 518, 528]
Ofloxacin	appr. 2.5–5.5	(30–) 40 ⁸		(3–) 5–8	[155, 289]
OKT 3	see Muromonab-CD3				
Olanzapine	appr. 0.02–0.03 (–0.05)	0.2	1 ⁸ ; 4.9 ⁸	33 (21–54)	[28, 73, 121a, 423, 477a, 528]
Omeprazole ⁴⁸	– ⁹⁸			0.5–1 (–1.5)	
Ondansetron	0.03–0.3			3–5.5	[429]
Opipramol	0.1–0.5	2–3	7–10	6–12 ²⁶²	[104, 264]
Orphenadrine	0.1–0.2 (–0.6)	1.7	3.6 ⁸ ; 5–7	14–18	[86, 114, 340]
Oxatamide	0.02–0.1			14–30	[133, 155]
Oxazepam	0.2–1.5	2	3–5	6–20	[107, 155, 272, 468]
Oxazolam ¹⁵	see Nordazepam			1–2	
Oxcarbazepine	12–24 ¹⁷²			1–2.5 ¹⁷²	[155, 517, 519]
Oxpentifylline	see Pentoxifylline				
Oxprenolol	0.05–0.3 (–1.0)	2–3	10	1–4	[466]

Table (continued)

Substance	Blood-plasma/serum concentration ($\mu\text{g/ml}$)			$t_{1/2}$ (h)	Ref.
	Therapeutic ('normal')	toxic (from)	comatose-fatal (from)		
Oxycodone	(0.005–) 0.02–0.05	0.2	0.6; 5 ⁸	2–5 ⁵³	[340, 426, 528]
Oxyfedrine	appr. 0.06			4.2	[269]
Oxypurinol ⁶¹	5–15	20		18–30	[528]
Oxytocin	appr. –0.0002			3–5 min	[133, 155]
Paclitaxel	0.085–1 (?) ¹²²			4–8 (–13)	
Pamidronate	appr. 0.5–1			appr. 2.5	
Pancuronium	0.1–0.6	0.4 ⁸ ; 1 ⁹⁸	1.6	1.5–2.5	[536]
Pantoprazole	appr. –4.6			1–2	[155, 423]
Papaverine	(0.2–) 0.6–1 (–2)			1–2, 6–7	[428]
Paracetamol	(5–)10–25	100–150	200–300	2–4	[50, 166, 260, 331, 369, 442, 455, 484, 487, 535]
Paraldehyde	10–100	200	400–500	4–10	
Paraoxon	–	0.005			[528]
Paraquat	–	0.05	1–2 ²⁰¹		[155, 187, 528]
Parathion	–	0.01–0.05	0.05–0.08		[155, 527, 528]
Paroxetine ⁴⁸	<0.01–0.05 (–0.1)	0.35–0.4		16–24 ⁹³	[69, 170, 188, 283, 479, 480]
Pefloxacin	1–10 (3–6)	25		8–15	
Pemoline	appr. 1–7			7–13	
Penbutolol	0.01–0.3 (–1.0)			20–26	[466]
Penfluridol	0.004–0.025			70	[155, 528]
(D–)Penicillamine	1.7–5.6 (–11)			1–3	
Pentachlorophenol	–0.2	30	45		[133, 528]
Pentamidine	appr. 0.3–0.5			6–9	[155, 423]
Pentazocine	0.01–0.2	1–2	3	2–5	
Pentobarbital	1–10	10–19	15–25	20–40	
Pentoxifylline ⁷²	appr. 0.5–2			0.5–2 (4–6)	
Perazine	0.02–0.35	0.5 (6.1 ⁸)		8–16 (–35)	[164, 423]
Perici(y)azine	0.005–0.03	0.1		?	[340]
Perindopril	0.08–0.15			0.8–1.5 ²⁶⁵	[155, 423]
Perphenazine	0.001–0.02 (0.0008–0.0024) ¹⁶¹	0.05		8–12 (–21)	[308]
Pethidine ¹¹⁵	0.1–0.8	1–2	2 (–3)	3–6 (–10)	[10, 31, 177, 215, 257]
Phenacetin ⁶²	5–10 (–20)	50		appr. 1	[340, 468]
Phenazone (Antipyrine)	5–25	50–100		10–12	
Phencyclidine (PCP)		0.007–0.24	1–5	1–12	[317, 423, 528]
Phendimetrazine	0.02–0.24 (–0.3)			2–4	[133]
Phenelzine	0.001–0.002 (–0.04)	0.5	1.5	6–8	[155, 528]
Phenformin	0.03–0.1	0.6	3	4–13	[155, 423]
Pheniramine	0.01–0.27		2 (?)	16–19	[155, 423]
Phenmetrazine	0.02–0.25	0.5	4	ca. 8	
Phenobarbital	10–30 (15–40)	30–40	50–60	60–130	[60, 145, 157]
Phenol		50	90		[133, 528]
Phenprocoumon	0.16–3.6 (1–5)	appr. 5		100–160 ³⁵	[528]
Phensuximide	4–10 (–20)	80		4–12	[423, 528]
Phentermine	0.03–0.1	0.9	1	appr. 20	[423, 528]
Phenylbutazone ³⁶	50–100	120–200	400	30–175 ³⁷	[340, 468]
Phenylephrine	0.04–0.1			2–3	[423]
Phenylpropanolamine (Norephedrine)	0.1–0.5	2	48	3–7	[155, 340]
Phenytol	5–15 (10–20) ⁸¹	20–25	43 ⁸ ; 50	10–60 ³⁷	[6, 55, 145, 147, 193, 221, 351, 362, 416]
Pholcodine	appr. –0.2			?	[133]
Physostigmine	<0.001–0.005			0.4–1	[9, 14, 230]
Pimozide	appr. 0.004–0.01 (–0.02)			24–55	

REVIEW

Table (continued)

Substance	Blood-plasma/serum concentration (µg/ml)			t _{1/2} (h)	Ref.
	Therapeutic ('normal')	toxic (from)	comatose-fatal (from)		
Pinazepam ¹⁵	0.01–0.05			16	[272]
Pindolol	0.02–0.15	0.7–1.5		2–5	[466]
Pipamperone	0.1–0.4	0.5–0.6		<4	
Piperacilline	1–5 (20–70)			1–2	[423, 528]
Piperazine	0.02–0.1	0.5			[426, 429, 528]
Pipotiazine	0.001–0.06	0.1		8–11	[155, 340, 423, 528]
Piracetam	appr. 20–50			4.5–7	
Pirenzepine	0.03–0.45			8–20	
Piritramide	0.0088 ± 0.0053 ¹²⁸			4–10	[266]
Pirmenol	1–4			6–18	[155, 528]
Piroxicam	2–6	14 ⁸		30–70	
Pizotifen	0.007–0.009			26	
Prajmalium ⁴⁸	0.06–0.44			5–7	
Pramipexole	appr. 0.0002–0.007			8–14	[317, 423]
Pranlukast	appr. 0.2–1.2			appr. 2–9	[155, 423]
Prazepam ¹⁵	0.2–0.7	1		1–3	
Praziquantel	appr. 0.2			1–2.5	
Prazosin	0.001–0.02	0.9		2.9 ± 0.8	[269, 426]
Prednisolone	0.5–1			2–6	
Prilocaine	0.5–1.5 (–2) ¹²⁶	5–6	appr. 20	1–2	[162, 557]
Primaquine	appr. 0.1–0.2			4–7	[423]
Primidone ⁶³	4–12 (8–15)	20–50	65	4–12, 9–22	[60, 145]
Probenecid	100–200 (20–150)			3–17 ³⁷	
Procaine	0.2–2.5 (–10)	15–20	20	–0.5	[423, 528]
Procainamide ⁵	4–10 (3–9)	10–15	20	2–5	
N-Acetylprocainamide ³⁸	5–30 (10–35, 15–40)			3–7	
Prochlorperazine	0.01–0.05	0.2–0.3	5	7–9 (–18)	[155, 340, 528]
Procyclidine	0.08–0.63	1–2	7.8 ⁸	7–16	[423, 528]
Proguanil ⁴⁸	appr. 0.04–0.15 ¹¹⁴			13–24 ¹¹⁴	[117]
Promazine	0.01–0.05 (–0.4)	1	5	5–41 (8 ± 7)	
Promethazine	0.05–0.2 (–0.4)	1–2	2.4 ⁸ ; 1.8–5.4 ²⁵⁰	8–15 (–20)	[114, 506]
Propafenone ⁴⁸	0.4–3 (0.06–1)	2–3	7.7 ⁸	5–8, 2–32 ⁴⁸	[244, 426]
Propallylonal	0.3–10	>10		appr. 3	
2-Propanol	see Isopropanol				
Propantheline	appr. –0.02			1–3	[133, 155]
Propiomazine	<0.3 (?)			8–10	[114, 190]
Propofol	appr. 2–8			3–8 ⁹¹	[11, 299]
Propoxyphene	see Dextropropoxyphen				
Propranolol	0.02–0.3	(0.5–) 1–3	4–10	2–6	[466, 504]
Propylene glycol	0.05–0.5	1000–2000; 4700 ⁸			[62, 528]
Propylhexedrine	0.01	0.5	2–3	?	[133, 528]
Propyphenazone	3–12			1–1.5 (–3)	[340, 468, 469]
Prothipendyl	appr. 0.05–0.2	appr. 0.5 (–1)		2–3	
Protriptyline	0.05–0.3	0.5	1	50–200	
Pseudoephedrine	0.5–0.8		19–20	9–16	[423, 528]
Pyrazinamide	30–75			9–10 (–25)	[110, 155, 340]
Pyridostigmine	<0.05–0.2			1–2.5	[9, 554, 559]
Pyridoxine	0.003–0.018			3–6	[429]
Pyrimethamine	appr. –1.5			80–96	[133, 155]
Pyrithyldione	1–10			11–20	[340, 468, 469]
Quazepam ¹³¹	0.01–0.05 (–0.15)			39 (25–41)	[272, 423, 528]
Quetiapine	<1 ²³⁹	1.8 ⁸	12.7 ⁸	appr. 5–7 ²⁴⁰	[12, 102, 185, 374, 408]
Quinidine ⁴⁸	1–5	6–10	10–15	4–12	[357]
Quinine	1–7	10		4–15	[115, 390]

REVIEW

Table (continued)

Substance	Blood-plasma/serum concentration (µg/ml)			t _{1/2} (h)	Ref.
	Therapeutic ('normal')	toxic (from)	comatose-fatal (from)		
Rabeprazole	appr. -0.6			1-2	[423]
Ramipril	appr. 0.001-0.01 ²²⁸			1-5	[155]
Ranitidine	0.05-1			2-4	[344]
Reboxetine	C _{max} < 0.3			12-14	[135, 155]
Recainam	1.3-5.7			5-7	[7]
Remoxipride	2.15 ± 0.59 ¹³²		41-150	5-10	[114, 250, 290]
Retinol (Vitamin A)	0.2-0.8 (0.7-2.8 µmol/l)				[342, 429]
Ricin		0.0005			[276a]
Rifabutin	0.05-0.15			45 (?)	[155]
Rifampicin (Rifampin)	0.1-10 ¹⁰¹		55 ⁸	2.3-5	[28, 110, 236, 407a]
Rifapentine	?			13.2	[110]
Riluzole	appr. 0.05-0.5 (-1.5)			9-15	[317, 423]
Risperidone ⁴⁸	appr. 0.006 ¹⁵⁸		1.8 ⁸	2-4 ¹⁵⁹	[28, 401]
Ritonavir	appr. 5-11 (-20)			3-5	[155, 224]
Rivastigmine	?			1-2	[230, 423]
Rizatriptan	appr. -0.1			2-3	[155, 423]
Ropinirole	0.0004-0.006 ²⁵⁴			6 (2-10)	[263]
Ropivacaine		(1-) 2 ¹⁷³		2 ¹⁶⁸	[125, 332, 473]
Roxatidine	0.1-0.8			5-6	
Roxithromycin	4-12			12	[17, 155]
Salbutamol (Albuterol)	<0.01-0.02	0.1-0.15 ¹¹⁶	0.16	3-6	[303, 528]
Salicylamide	5-40			appr. 1	
Salicylic acid	20-200	300-350	(400-) 500	3-20	[77, 155, 207, 234, 329, 334, 409]
Scopolamine	0.0001-0.0003 (-0.001)			appr. 3	[423, 528]
Secbutabarbital	5-10 (-15)	20	30	34-42	
Secobarbital	1.5-5	7-10	10-15	15-30	
Selegiline	see Amphetamine and Methamphetamine			1.2	[155]
Selenium	0.045-0.13	0.4			[133, 155, 359]
Sertraline	0.05-0.25 (-0.5)	0.29 ⁸	1.6 ⁸ ; 3 ⁸	24-28	[28, 317, 345a, 423, 528]
Sildenafil	appr. 0.05-0.5			3-5	[155, 423]
Silver	-0.005	0.06-0.6			[528]
Sirolimus	0.005-0.015 ²⁴⁴	0.015 (-0.06)		57-63	[155, 256, 322, 324, 576]
Sodium nitroprusside	see Thiocyanate			0.1	
Sodium oxybate (GHB)	see 4-Hydroxybutyrate				
Sodium valproate	see Valproic acid				
Sotalol ¹⁶⁷	0.5-3 (-4)	7.5-16 ⁸	40 ⁸ ; 43 ⁸	5-13 (-17)	[118, 466, 498]
Sparteine ⁴⁸	0.5-1			2.6	
Spiramycin	appr. -3			5-8	[61, 155]
Spirolactone	(0.05-) 0.1-0.25 (-0.5) ⁷³			13-24 ⁷³	[423, 528]
Stiripentol	appr. 4-22	20		13	[133, 155]
Streptomycin	1-5 (15-40)	40-50		2-4	[317, 423, 528]
Strontium	-0.03				[133]
Strychnine		0.075-0.1	0.2-2	appr. 10-15	[423, 528]
Sufentanil	0.0005-0.01 ⁴		0.001-0.007 ⁸	2-5, 22	[19, 28, 52, 194, 226, 403, 460, 462]
Sulbactam	-80			1-2 ⁷⁰	[88, 155]
Sulfamethoxazole	30-60 ⁵⁶	200-400		9-12	[155, 389]
Sulfasalazine ³⁴	5-30 (-70)			4-10	
Sulfinpyrazone	6-17			3-5	
Sulindac	1-5 ¹⁰²			appr. 7	[91]

Table (continued)

Substance	Blood-plasma/serum concentration (µg/ml)			t _{1/2} (h)	Ref.
	Therapeutic ('normal')	toxic (from)	comatose-fatal (from)		
Sulpiride	0.05–0.4 (–0.6) ²²⁵		3.8 ⁸ ; 38 ⁸	4–7	[28, 104, 155, 528]
Sultiam (Sulthiame)	0.5–12.5 (6–10)	12–15	20–25	3–30	[496]
Sumatriptan	0.018–0.06			2	[423]
Suramin	>100 ¹¹⁷	300 ¹¹⁸		44–54	[281]
2,4,5-T	see 2,4,5-Trichloro-phenoxyacetic acid				
Tacrine	appr. 0.01			2–4	[230]
Tacrolimus (FK–506)	0.005–0.015 (–0.02)	(0.015–) 0.02–0.025		9–16	[216, 254, 306, 360, 511, 528, 533, 538–540, 543, 564]
Talinolol	0.04–0.15		5 ⁸ , 12 ⁹ ; 20 ⁸	10–14	[466, 514, 515]
Talipexole	appr. 0.0001–0.001			5–9	[423]
Tamoxifen	0.05–0.5			5–7 ⁶	[133, 155]
Taxol	see Paclitaxel				
Teicoplanin	(10–) 15–20 (–40)	200		10–15; 83–168 ⁸³	[243, 561]
Temazepam	0.02–0.15 (–0.9)	1	8.2 ⁸ ; 14 ⁸	6–25	[139, 272, 423, 528]
Tenoxicam ¹⁷⁴	appr. 5–10			(50–) 70–90	[198, 370]
Terazosin	appr. 0.02–0.08			8–12	[423]
Terbinafine	0.01–0.03 ²⁰⁵			22–26	[155, 527, 528]
Terbutaline	0.001–0.006 (–0.01)		0.04	16–20 ⁸⁹	[423, 528]
Terfenadine	<0.01	0.06 ¹⁴⁸	0.4 ⁸	15–22 ⁶⁴	[28, 155, 566]
Tetrachloroethylene			4–5		[528]
Tetracycline	1–5 (5–10)	30		6–10	[155, 423, 528]
Tetrazepam ⁴⁰	0.05–0.6 (–1)			10–26	[272]
Thalidomide	0.5–1.5 (–8)			5–9	[155, 423]
Thallium		0.1–0.5 ¹⁷⁹ ; 5.6 ⁸	0.5–11	– ⁶	[59, 155, 528]
Theobromine	10–15	20		6–10	[528]
Theophylline	(5–) 8–15 (–20) ⁸²	20	50	6–9 ⁴¹	[84, 103, 120, 122, 157, 180, 217, 267, 404, 447, 475, 508, 553]
Thiamphenicol	0.5–3–10 (–15)	20		2–7	[423]
Thiazinamium	0.05–0.15	0.3			[317, 423, 528]
Thiocyanate	1–12 ¹⁴⁴	35–50	200	3–4 ⁶	[3, 155, 446, 528]
from Nitroprusside	5–30	50–100			
Thiopental ⁵⁷	1–5		10–15 ⁵⁸	3–8	
Thiopropazine	appr. 0.001–0.02	0.1			[423]
Thioridazine ¹³³	0.1–2 (0.2–0.8–1.25) ¹³³	2.5–5	3–10	7–13 (–36)	[114]
Thiothixene	see Tiotixene				
Thyroxine	see Levothyroxine				
Tiagabine	0.05–0.2 (?)	0.5–0.6; 3.1 ⁸ , 24 ⁵		7–9 (4–13)	[2, 155, 294, 295, 318, 399, 423, 519]
Tiaprude	max. 1–2			appr. 3–4	[423]
Tiaprofenic acid	appr. 15–40 ¹⁹³			1.5–3	[89, 155, 414]
Ticlopidine	<1–2 (?)			0.8 ¹⁰⁰	
Tilidine ²⁵	0.05–0.12		1.7 ⁸	appr. 3	
Tiludronate	0.2–1.5			65–78 (–150)	[472]
Timolol	0.005–0.05 (–0.1)			2–6	
Tin	0.03–0.14				[133, 528]
Tinidazol	max. –60			11–15	[133, 155]
Tiopronin	appr. 2–5			23 ± 11	[158]
Tiotixene	0.001–0.03 (0.002–0.014)	0.1		34–36	[346]
Tizanidine	appr. 0.015			appr. 2.5	[155]
Tobramycin	4–10 ¹⁵⁴	12–15		2–3	[71, 155, 454, 489]
Tocainide	4–12 (6–10)	13–15; 20 ⁸	74 ⁸ ; 140 ⁸	8–25	[23a, 28, 155, 292]
Tofenacine	0.025–0.1	0.5–1			[340, 528]
Tolbutamide	50–100	400–500	640 ⁸	4–12	[26, 528]

Table (continued)

Substance	Blood-plasma/serum concentration (µg/ml)			t _{1/2} (h)	Ref.
	Therapeutic ('normal')	toxic (from)	comatose-fatal (from)		
Tolmetin	10–80	60 (?)		2–4	[528]
Toluene			10		[528]
Topiramate	3.4–5.2 (–10?) ²¹⁸			20–30	[399, 423, 519]
Topotecan	appr. 0.001–0.01 ¹⁹⁰			2–3	[152, 155, 205]
Tramadol ⁴⁸	0.1–1 (>0.3) ⁸⁷	1	2 ^{8, 49} ; 13 ⁸ ; 38.3 ^{8, 252}	5–10	[35, 298, 341, 528]
Tranexamic acid	10–50			10	
Tranlycypromine	–0.2 (?)	0.5 ^{8, 202}	0.7 ⁸ ; 5 ⁸	1.5–3.5	[238]
Trapidil	(4–) 6–10			2–6, 12	[155, 269, 339]
Trazodone ¹⁴⁵	(0.5–) 0.8–1.6	4	12–15 ⁸	4–8 (6–13)	[104, 381]
Triamterene	0.01–0.1			1.5–4	[155, 426]
Triazolam	0.002–0.02	0.04		2–5	[229, 272, 366]
2,2,2-Tribromoethanol		50	90		[133, 528]
Trichloroethane			100–1000		[528]
2,2,2-Trichloroethanol	5–15	40–70	60–100		[28, 133, 528]
2,4,5-Trichlorophenoxyacetic acid (2,4,5-T)	–	appr. 100	200	23–33	[155, 528]
Trifluoperazine	0.001–0.01 (0.05)	0.1–0.2		7–18	
Triflupromazine	0.03–0.1	0.3–0.5		appr. 6	
Trihexyphenidyl	– ⁷⁵	0.5		3–5	[340, 524]
Trimeprazine	see Alimemazine				
Trimethadione	20–40			?	[528]
Trimethobenzamide	1–2			?	[133, 528]
Trimethoprim	1.5–2.5 ⁵⁶	20		8–11	[155, 389]
Trimipramine	0.01–0.25	0.5	1.7–8.2 ²⁵¹	10–20 (–40)	[114]
Tripelennamine	0.02–0.06		10	5–8	[423, 428, 528]
Triprolidine	0.004–0.045			2–5	[428]
Tropisetron	appr. 0.02–0.05			5.6–8.6	[429]
Tubocurarine	(0.6–) 1–3 (–6)			2–4	
Tungsten	–0.035				[133]
Urapidil	appr. 0.1–0.2			2.7–7	[155, 269]
Valdetamide	see Diethylpentenamide				
Valnoctamide	5	40		?	[528]
Valproic acid	40–100 (50–150)	150–200	720 ⁸	10–20 (7–17)	[28, 60, 145]
Vanadium	–0.05				[133]
Vancomycin	≤5–10 (–12) ¹⁴²	30		4–11 ⁸³	[28, 71, 119, 144, 296, 323, 330, 394, 551]
Vecuronium	appr. 0.2–0.37 (–0.5)			1–1.5	[133, 155, 340]
Venlafaxine	appr. 0.2–0.4 ¹⁸⁹	1–1.5 ²⁶⁶	6.6 ⁸	3–5	[28, 270, 528]
Verapamil ⁹⁰	(0.01–) 0.02–0.25 (–0.4)	1	2.5; 3.9 ⁸	6–14 ⁴²	[114, 268, 292, 319, 471]
Vigabatrin	2–9 (–15) ⁹⁴			5–8	[28, 519]
Viloxazine	–6.0–8.0 (?)			2–5	[104, 155, 423]
Vincamine	<0.25 (?)			1–2 (8–17)	
Vinylbital	1–3	5	8	18–33	
Viquidil	appr. 0.15–0.25			6–12	
Vitamin A	see Retinol				
Vitamin C	see Ascorbic acid				
Vitamin D	>50 nmol/l ²⁶³			appr. 30 ⁶	[328]
Warfarin	1–3 (–7)	10–12	100	37–50 ⁹⁷	[155, 426, 469, 555]
Wismut	see Bismut(h)				
Xamoterol	appr. 0.02–0.04 (–0.1)			7–8	[133, 155]
Xipamide	–20			5–8	[133, 155]
Xylene			3–40		[528]
Yohimbine	appr. 0.05–0.3			1–3	[133, 423]
Zafirlukast	0.005–0.03			10	[155, 423]

Table (continued)

Substance	Blood-plasma/serum concentration (µg/ml)			t _{1/2} (h)	Ref.
	Therapeutic ('normal')	toxic (from)	comatose-fatal (from)		
Zalcitabine	appr. 0.1 (0.5 µmol/l)			1–3 ⁸³	[66, 358]
Zanoterone	0.1–0.5				[568]
Zidovudine ⁵¹	0.1–0.3 (–1)	2–3		1–1.5	[66, 136, 137, 155, 212, 358]
Zinc	0.6–1.3	2	4 ²⁸		[429]
Zipeprol	0.1–0.7		5.8 ⁸ ; 10.6 ⁸	?	[133, 428]
Ziprasidone	0.02–0.06			2–7	[155, 423]
Zolmitriptan	appr. 0.007–0.01			2.5–3	[423]
Zolpidem	0.08–0.15 (–0.2)	0.5	2–4	2–5	[96, 114, 154, 155, 160, 282, 423, 528, 563]
Zonisamide	(15–) 20–30 (–40)	(30–) 40–70	100 ²⁰⁸	50–70 ²⁰⁹	[276, 347, 399, 519]
Zopiclone	<0.1	0.15	0.6–1.8	3.5–8	[114, 155, 423, 528]
Zotepine	0.01–0.15	0.15–0.2		14–16	[155]
Zuclopenthixol ⁴⁸	0.005–0.1	0.15–0.3		appr. 20	[423, 469]

Clinical categories used for grouping analytical data:

Therapeutic: blood-plasma/serum concentrations (in general, trough at steady state) observed following therapeutically effective doses; no, or only minimal, side-effects (drugs); 'normal': concentrations associated with no, or only minimal, toxic effects (other xenobiotics).

Toxic: blood-plasma/serum concentrations which produce toxicity.

Comatose-fatal: blood-plasma/serum (comatose) concentrations and whole blood (fatal) concentrations reported to have caused coma and death, respectively.

t_{1/2}: in general, terminal elimination half-life.

Ref.: if not specifically referenced, data was taken from review articles [13, 28, 40, 41, 57, 63, 72, 99, 100, 104, 105, 109, 111, 112, 114, 133, 155, 165, 240, 272, 317, 340, 354, 376, 378, 393, 395, 423, 426–429, 441, 443, 466, 468, 469, 489, 491, 495, 510, 527, 528, 534] and/or supplemented with our clinical and forensic analytical results.

Annotations

- ¹ active metabolite of acebutolol
- ² as salicylic acid (for analgesic and antipyretic effect)
- ³ as digoxin
- ⁴ during mechanical ventilation
- ⁵ slow (poor) and rapid (extensive) acetylators (metabolizers)
- ⁶ days
- ⁷ active metabolites nortriptyline (see Table) and amitriptyline oxide (t_{1/2}: 1.5–3 h)
- ⁸ case report
- ⁹ in patients with impaired renal function in some cases up to 100 h
- ¹⁰ active metabolite 6-mercaptopurine (t_{1/2}: 1–1.5 h)
- ¹¹ appr. 0.2 h for azathioprine
- ¹² active metabolite carbamazepine-10,11-epoxide (t_{1/2}: 5–16 h; usual plasma concentration range 0.2–2 µg/ml) should be considered in case of intoxication
- ¹³ each sum carbromal(um) + carbamide (t_{1/2}: 12–15 days)
- ¹⁴ each as trichloroethanol
- ¹⁵ active metabolite desmethyldiazepam = nordazepam (see Table)
- ¹⁶ nephrotoxic
- ¹⁷ active metabolite desmethylclobazam
- ¹⁸ duration of pharmacological effects: 0.3–0.4 h; major metabolite: benzoyllecgonine (t_{1/2}: 5–6 h)
- ¹⁹ active metabolites nordazepam and oxazepam (see Table)
- ²⁰ active metabolite nordothiepin (t_{1/2}: 20–60 h)
- ²¹ active metabolite desmethyldoxepin (nordoxepin, t_{1/2}: 33–80 h) should be considered in case of intoxication
- ²² benzodiazepine antagonist
- ²³ active metabolites
- ²⁴ active metabolite desalkylflurazepam (t_{1/2}: 74 ± 24 h)
- ²⁵ active metabolite nortilidine (t_{1/2}: 6 h), comatose-fatal plasma concentration: 4.4 µg/ml⁸
- ²⁶ in some cases up to 80 h
- ²⁷ active metabolite levomepromazine sulfoxide (t_{1/2}: 5–10 h)
- ²⁸ t_{1/2} for biological effects
- ²⁹ active metabolite desipramine (see Table)
- ³⁰ active metabolites diazepam, nordazepam plus oxazepam (see Table)
- ³¹ active metabolite of mesuximide
- ³² sum of active metabolites
- ³³ each as desacetylmepipranolol
- ³⁴ active metabolite 5-aminosalicylic acid (mesalazine, see Table); rapid/slow acetylators of the primary metabolite sulfapyridine
- ³⁵ in some cases longer
- ³⁶ active metabolite oxyphenbutazone (t_{1/2}: 27–64 h)
- ³⁷ dose dependent
- ³⁸ active metabolite of procainamide
- ³⁹ for the management of osteoporosis

- ⁴⁰ active metabolite nortetrazepam (t_{1/2}: 25–51 h)
- ⁴¹ smokers: 3–6 h
- ⁴² during steady state
- ⁴³ astemizole plus desmethylastemizole
- ⁴⁴ blood drug concentrations following therapeutically effective doses below detection limit
- ⁴⁵ as decanoate (t_{1/2}: 5–12 days)
- ⁴⁶ in intensive care patients in some cases 8–22 h
- ⁴⁷ physiologic
- ⁴⁸ rapid (extensive) and slow (poor) metabolizers (genetic polymorphism)
- ⁴⁹ 6 month-old-child, appr. 15 h after 100 mg rectally tramadol
- ⁵⁰ total labelalol: 0.7–5.0 µg/ml
- ⁵¹ C_{max} 0.038 ± 0.006 µg/ml after a single oral dose of 150 µg/kg in nine persons with onchocerciasis (t_{1/2}: 56 ± 7 h)
- ⁵² as enalaprilat
- ⁵³ duration of clinical effect: 3–5 h
- ⁵⁴ product after hydrolysis
- ⁵⁵ narcotic; analyzed during distribution phase
- ⁵⁶ for pneumocystis carinii pneumonia (PcP) treatment: sulfamethoxazole 100–200 µg/ml, trimethoprim 5–10 µg/ml
- ⁵⁷ metabolite: pentobarbital (see Table)
- ⁵⁸ "narcotic"
- ⁵⁹ higher with meningism (–25 µg/ml); decreased protein binding in neonates results in increased unbound drug
- ⁶⁰ each as 2-hydroxyflutamide (active and major metabolite)
- ⁶¹ active metabolite of allopurinol
- ⁶² active metabolite paracetamol (acetaminophen, see Table)
- ⁶³ active metabolite phenobarbital (see Table)
- ⁶⁴ as active carboxylic acid metabolite = fexofenadine (t_{1/2}: mean 15 h)
- ⁶⁵ 1 mg oral alprazolam/day equals appr. a plasma concentration of 10 ng alprazolam/ml during steady state. Usually higher doses/plasma concentrations are recommended for the treatment of phobias when compared to panic disorder/attacks
- ⁶⁶ highly inter- and intraindividual variable kinetics; for children (therapeutically): 0.04–0.1 µg/ml; active metabolite desmethylchlorpromazine
- ⁶⁷ ≥0.25 µmol/l desirable for echinococcosis
- ⁶⁸ mean: 27 h; for geriatric patients (>65 years) in some cases increased to more than 90 h
- ⁶⁹ active metabolite 2-hydroxydesipramine (t_{1/2}: mean 18 h; in patients with impaired renal function several fold increased)
- ⁷⁰ in patients with impaired renal function several fold increased
- ⁷¹ in colon tissue 0.8–1.8 h after 1 × 2 g i.v.: 94.0–7.4 µg/g
- ⁷² active metabolites 1-(5-hydroxyhexyl)-3,7-dimethylxanthine and 1-(3-carboxypropyl)-3,7-dimethylxanthine (t_{1/2}: 1–1.6 h), among others, with 5 and 8 times, respectively, higher plasma levels than pentoxifylline
- ⁷³ as canrenone (one of the active metabolites of spironolactone, t_{1/2}: 1.31.4 h)

- 74 appr. 8 h after ingestion of probably 210 mg haloperidol and 1400 mg orphenadrine-HCl with life-threatening arrhythmias
- 75 data on effective plasma concentrations for Parkinson's disease not available
- 76 peak: 20–30 µg/ml, trough: <7 µg/ml
- 77 for hypertension: 0.2–0.45 µg/ml; for angina/CHD, arrhythmias: 0.3–0.8 µg/ml
- 78 therapeutic concentration of the unbound fraction: appr. 0.5–2 µg/ml
- 79 in mmol/l (mEq/l, mval/l): 0.4–1.2 (0.6–1.4), toxic from 1.5
- 80 terminal elimination $t_{1/2}$: 37 ± 6 h; increased in case of renal dysfunction
- 81 therapeutic concentration of the unbound fraction: 1–2.2 µg/ml
- 82 for (sleep) apnea: 5–10 µg/ml
- 83 increased in patients with impaired renal function
- 84 C_{max} 3–5 h after 4 mg oral loperamide hydrochloride: 1–3 ng/ml
- 85 active metabolite N-desmethylclomipramine ($t_{1/2}$: 21–65 h, mean: 40 h) 12–36 h
- 86 post-operative (on-demand; i.v.): 0.02–1–2 µg/ml (median: 0.29–0.92 µg/ml) as minimal (analgesic) effective concentration; O-desmethyltramadol: 0.03–0.04 µg/ml (median: 0.036 µg/ml)
- 88 10–36 h
- 89 11–26 h
- 90 stereoselective metabolism (therapeutic concentration after oral application higher than after intravenous administration)
- 91 $t_{1/2}$ for β -phase: 0.5–1 h
- 92 as albendazole sulfoxide (active metabolite)
- 93 $t_{1/2}$ in slow (poor) metabolizers appr. 40 h
- 94 through plasma concentration at steady state during 2 g twice daily p.o. appr. 9 µg/ml; C_{max} 0.8 h after 1 g orally: appr. 45 µg/ml
- 95 as active metabolite methimazole
- 96 mean 80 min
- 97 15–85 h
- 98 plasma concentrations does not correspond with pharmacological effects
- 99 plasma concentrations of the less potent major metabolite 6- β -naltrexol ($t_{1/2}$: 11–13 h) are usually 1.5–10 times higher
- 100 appr. 25–30 h for the metabolites
- 101 sum rifampicin plus metabolites
- 102 sum sulindac plus metabolites (sulindac sulfide, $t_{1/2}$: 15–18 h; $t_{1/2}$ sulfone: 17–20 h)
- 103 abuse
- 104 sum carisoprodol plus meprobamate
- 105 12–15 days for the metabolites
- 106 $t_{1/2}$ for total platinum plasma concentrations: 20–40 h (up to 6–7 days) 2–20 µmol/l
- 108 carboxylic acid metabolite ($t_{1/2}$: appr. 20 days): 1.5–5.5 µg/ml
- 109 during concomitant therapy with carbamazepine or phenytoin 8–33 h (mean: 15 h), during concomitant therapy with valproic acid 31–89 h (mean: 60 h)
- 110 in infants and after intoxications in some cases dramatically increased
- 111 during steady state 3–4 h after oral doses of 100–400 mg; prophylaxis of candidiasis: >0.2 µg/ml and of aspergillosis: >1.0 µg/ml in patients with acute myeloid leukemia (AML)
- 112 plasma concentrations of the major metabolite 13-cis-acitretin are usually higher
- 113 higher and increased, respectively, in patients with impaired hepatic function; for tinnitus aurium: therapeutic plasma concentration appr. 1–2 µg/ml
- 114 biologically active/major metabolite cycloguanil ($t_{1/2}$: 8–17 h): plasma concentration level after daily oral doses of 100–200 mg proguanil appr. 0.02–0.06 µg/ml
- 115 active metabolite norpethidine ($t_{1/2}$: 14–24 (–48) h): toxic from appr. 0.5 µg/ml
- 116 tremor, hypokalemia
- 117 as cytostatic drug: >200 µg/ml
- 118 neurotoxic
- 119 in terminal renal insufficiency appr. 0.5–2 µg/ml, cumulation of the inactive metabolite N-acetyl-5-aminosalicylic acid (Ac-5-ASA) up to 20 µg/ml without adverse effects
- 120 $t_{1/2}$ of the inactive major metabolite N-acetyl-5-aminosalicylic acid (Ac-5-ASA) appr. 6–9 h
- 121 tocolytic (4.5–6.25 mval(mEq)/l, 2.25–3.125 mmol/l). Approximate normal range: 18–25 µg Mg²⁺/ml (0.74–1.03 mmol/l); conversion factor: mg/dl × 0.4113 = mmol/l
- 122 C_{max} appr. 2–8 µmol/l (i.e. 1.7–6.8 µg/ml, after 170–275 mg/m² intravenously for 6 h); much lower after intraperitoneal injection
- 123 as transdermal system (patch); plasma concentrations of the major metabolite cotinine ($t_{1/2}$: mean 16–20 h) appr. 10 times higher
- 124 mean 2 h; after application of the transdermal system possibly longer
- 125 active metabolites desipramine (see Table), 2-hydroxyimipramine ($t_{1/2}$: 6–18 h), and 2-hydroxydesipramine⁶⁹
- 126 3–7 min after retrobulbar blockade: 0.5–1.1 µg/ml
- 127 for myasthenia gravis
- 128 EC₅₀ analgesia; EC₅₀ respiratory depression: 0.035 ± 0.022 µg/ml
- 129 appr. 14 h after oral ingestion of 1.5 g
- 130 $t_{1/2}$ of the active metabolite norfluoxetine: 7–9 days (mean)
- 131 active metabolites 2-oxoquazepam ($t_{1/2}$: 39 (28–43) h) and N-desalkyl-2-oxoquazepam (N-desalkylflurazepam, $t_{1/2}$: 74 ± 24 h)
- 132 peak plasma concentration during steady state (C_{max}^{ss})
- 133 range of plasma concentrations after therapeutically effective doses of thioridazine for the active metabolites mesoridazine (thioridazine-2-sulfoxide): 0.2–1.6 µg/ml ($t_{1/2}$: 10–14 h) and sulforidazine (thioridazine-2-sulfone): up to 0.6 µg/ml ($t_{1/2}$: 10–16 h) and for the inactive metabolite thioridazine-5(ring)-sulfoxide: 0.06–4 µg/ml; probably, the best correlation exists between the plasma concentration of mesoridazine and the clinical response
- 134 usually sleep occurred with ≥0.1 µg/ml; in infants and children (<13 years): in some cases during mechanical ventilation up to 3 µg/ml; α -hydroxymidazolam-glucuronide likely contributes in case of impaired renal function to prolonged sedation
- 135 plasma concentration range of the primary metabolite 1,5-dimethyl-3,3-diphenyl-2-ethylidene-pyrrolidine during steady state: 0.005–0.055 µg/ml (daily oral methadone dose: 10–225 mg, mean 60 mg)
- 136 ratio clozapine/active metabolite N-desmethylclozapine (norclozapine, $t_{1/2}$: 19.2 ± 10.2 h) usually 1.0 to 2.5
- 137 maximum antiemetic effect at >0.01 µg/ml
- 138 active metabolite descarboethoxyloratadine ($t_{1/2}$: 17–24 h): appr. 0.005–0.02 µg/ml
- 139 0.15 ± 0.05% per h
- 140 during chronic administration appr. 10–20 h (induction of own metabolism)
- 141 caution is warranted in case of concomitant use or intoxication with serotonin reuptake inhibitors (SSRI) as citalopram, clomipramine (fluoxetine, paroxetine): possible serotonin syndrome
- 142 trough concentration; peak concentration: <40 µg/ml
- 143 distribution half-life: 0.3–0.5 (–1) h
- 144 non-smoker: 1–4 µg/ml (17–69 µmol/l); smoker: 3–12 µg/ml (52–206 µmol/l)
- 145 major active metabolite 1-m-chlorophenylpiperazine; plasma concentration appr. 1/10 compared to trazodone
- 146 plasma concentration for maximal cellular accumulation of the active form gemcitabine-5'-triphosphate
- 147 after topical nasal or ocular administration
- 148 Torsade de pointes, usually due to cytochrome P450 3A4 inhibition (e.g., ketoconazole, erythromycin) and/or impaired hepatic function after oral administration; after topical application: plasma concentration < 0.03 µg/ml and $t_{1/2}$ appr. 22 h
- 149 for each added 1 mg/day dose of clonazepam, there is appr. an increase of 12 ng/ml in the plasma (patients with panic disorder)
- 151 sum amoxapine and major metabolite 8-hydroxyamoxapine ($t_{1/2}$: appr. 30 h; $t_{1/2}$ 7-hydroxyamoxapine: 4–6.5 h)
- 152 sum bupropion (amfebutamone) and morpholinole metabolite ($t_{1/2}$: 19–22 h)
- 153 after i.m.-application as decanoate appr. 3 weeks
- 154 C_{min} <1–2 µg/ml at best (especially in patients with renal dysfunction)
- 155 appr. 0.02 µg/ml in organophosphorous ester poisoning depending on the clinical symptoms
- 156 in case of organophosphorous ester (e.g. parathion) intoxication; 250 mg intravenously as bolus followed by an infusion of 750 mg/24 h if used as an antiarrhythmic appr. 0.1–0.4 µg/ml
- 158 using daily oral doses of ≤25 mg 0.00046 µg risperidone/ml per mg dose and 0.0064 µg/ml per mg dose for risperidone plus 9-hydroxyrisperidone (the clinical effects likely results from the combined concentrations)
- 159 extensive metabolizers; $t_{1/2}$ for risperidone plus 9-hydroxyrisperidone: 22–24 h
- 160 6 case reports: post-mortem 5.2–49 µg citalopram/g blood and 0.3–1.4 µg desmethylcitalopram/g blood
- 161 concentration/dose-values for extensive metabolizers: 0.025–0.55 (median 0.098) nmol/l per mg oral perphenazine, and 0.096–0.75 (median 0.195) nmol/l per mg oral perphenazine (mol wt 506.07) for poor metabolizers, respectively
- 162 two cases after ingestion of appr. 4 g moclobemide in combination with clomipramine (plasma concentration: 0.3–0.5 µg/ml, i.e. toxic)
- 163 as R-enantiomer, mean: 9 µg/ml
- 164 dosage: 50–55 mg/kg per day
- 165 appr. 2.5 h after ingestion of 50–100 mg amlodipine besylate with alcohol (263 mmol ethanol/l)
- 166 101 ng/ml 4 h after ingestion of 70 mg and 185 ng/ml at 10.5 h, complicated by oxazepam ingestion
- 167 data for d,l-sotalol
- 168 after i.v.-application; $t_{1/2}$: 4–7 h following epidural administration (appr. 4–5 h following intercostal block and appr. 8 h following brachial plexus blockade, respectively)
- 169 mean 19 h; $t_{1/2}$ of oral cyclosporine microemulsion is appr. 8 h
- 170 a longer $t_{1/2}$ has been reported in elderly patients, up to 3.8 days
- 171 target range of activated partial thromboplastin time (aPTT) is prolongation of 50–70 sec, aPTT prolongation of more than 100 sec has been associated with an increased risk of hemorrhagic events

- 172 as 10-hydroxycarbazepine for seizures; in patients with trigeminal neuralgia, therapeutic serum concentrations of the active metabolite 10-hydroxycarbazepine ($t_{1/2}$: 8–11 h): 50–110 $\mu\text{mol/l}$
- 173 mild CNS symptoms (limited data)
- 174 pharmacologically inactive metabolites 5' and 6'-hydroxytenoxicam
- 175 effective plasma concentrations for the 2 active metabolites: O-desmethylencaimide (0.05–0.3; toxic from 0.3 $\mu\text{g/ml}$, $t_{1/2}$: 11 h) and 3-methoxy-o-desmethylencaimide (0.06–0.28 $\mu\text{g/ml}$; $t_{1/2}$: >24 h) during long-term therapy
- 176 in poor metabolizers 9–11 h
- 177 "normal": 0.001–0.006; smoker: 0.005–0.012 (–0.15) $\mu\text{g/ml}$; $\mu\text{mol/l} \times 0.026 = \mu\text{g/ml}$
- 178 reference value; 0.001 $\mu\text{g/g}$ creatinine or 0.0014 $\mu\text{g/ml}$ urine; <30 $\mu\text{g/24 h}$ urine ("normal"); "toxic" from appr. 0.05–0.3 $\mu\text{g/ml}$ urine
- 179 >0.04 $\mu\text{g/ml}$ urine
- 180 up to years in chronically exposed workers
- 181 combination with 2,4-D and chlorpyrifos
- 182 in case of intoxication/overdose: 70–90 h
- 183 overdose
- 184 one case of toxicokinetic estimation in acute KCN poisoning
- 185 tentative target range; $C_{\text{max}}^{\text{ss}}$ appr. 4.6 $\mu\text{g/ml}$ (300 mg tid) and appr. 8.4 $\mu\text{g/ml}$ (600 mg tid)
- 186 prolonged in case of impaired renal function to 16–43 h; >100 h in dialysis dependent patients
- 187 dependent of urine pH, if alkaline appr. 8–10 h
- 188 females showed significantly longer elimination half-lives (35.4 \pm 13.7 h) than males (mean 21–26 h); the $t_{1/2}$ of the R(–)-enantiomer is twice that of the S(+)-enantiomer
- 189 after doses of 25, 75, and 150 mg every 8 h for 3 days, mean peak serum levels were 0.053, 0.167, and 0.393 $\mu\text{g/ml}$; corresponding levels of the major active metabolite O-desmethylvenlafaxine ($t_{1/2}$: 10–11 h) were 0.148, 0.397, and 0.686 $\mu\text{g/ml}$
- 190 at least 10 nmol of the lactone (mol wt 421.46) l (?); decreases in absolute neutrophil counts of 50–90% were observed with steady state plasma concentrations of total topotecan (lactone + hydroxy acid) of 20–60 nmol/l, respectively
- 191 a mean steady state peak plasma concentration of 0.286 $\mu\text{g/ml}$ was observed in healthy volunteers after 60 mg (oral solution) every 12 hours for 10 doses
- 192 the metabolite 2',2'-difluoro-deoxyuridine (dFdU) has minimal antitumor activity but may contribute to the toxicity of gemcitabine
- 193 C_{max} after 200 mg tid
- 194 serum concentration of benzoic acid following high dose diazepam i.v.-infusion and severe metabolic acidosis (5-year-old girl; urine concentration: 1200 $\mu\text{g/ml}$)
- 195 1.5 h in dogs after i.v.-administration
- 196 for erythropoietic protoporphyria (EPP)
- 197 trough; peak: 0.1–0.5 $\mu\text{g/ml}$
- 198 +0.4 μg of its metabolite 3-deacetylpancuronium/ml
- 199 "normal": \leq 2–3% of total Hb; from 15–20%: cyanosis, headache, dizziness
- 200 "normal": \leq 5% (elderly: –15%); smoker: 8–10%
- 201 2 h after ingestion
- 202 3 h after ingestion of 400 mg with no severe symptoms
- 203 mean steady state trough concentration; peak: 5–15 $\mu\text{g/ml}$
- 204 for Parkinson's disease (appr. 15–50 pmol/ml)
- 205 peak: 0.5–3 $\mu\text{g/ml}$
- 206 plasma concentrations below detection limit; plasma concentrations of the active metabolite 6-methoxy-2-naphthylacetic acid ($t_{1/2}$: appr. 24 h), which appears to be responsible for the effects, were 10–37 $\mu\text{g/ml}$ 3–6 h after single oral doses of 250, 500, and 1000 mg
- 207 active metabolite 6-O-desmethyldonepezil
- 208 coma in a patient overdosing zonisamide, carbamazepine, and clonazepam
- 209 25–30 h in patients co-medicated with enzyme-inducing anticonvulsants
- 210 2–4 h in patients co-medicated with enzyme-inducing anticonvulsants
- 211 long-term (2–3 years) treated renal-transplant patients had significantly lower trough plasma concentrations of mycophenolic acid (1.94 \pm 0.24 $\mu\text{g/ml}$), the active metabolite, compared with patients taking mycophenolate mofetil (1 g twice daily) short-term (2–10 months; 3.53 \pm 0.45 $\mu\text{g/ml}$). Proposed mycophenolic acid pre-dose target concentration: 1–3.5 $\mu\text{g/ml}$
- 212 as mycophenolic acid
- 213 ten men with multiple sclerosis, 10–20 mg p.o. every 6 h 30 min before the next dose; peak levels <0.1 $\mu\text{g/ml}$ 30 min after a dose
- 214 nine patients, maximum tolerated oral dose 50–100 mg
- 215 $t_{1/2}$ metabolite 3-O-methyldopa: 15 h
- 216 appr. 2.5 $\mu\text{mol/l}$ (1 $\mu\text{g/ml}$) 24 h after single doses of 100–800 mg and during daily treatment with 200 mg
- 217 active metabolite 14-hydroxyclarithromycin ($t_{1/2}$: 5–7 h)
- 218 C_{max} following oral administration of 200, 400, 800, and 1200 mg, respectively: 3.7, 8, 18, and 29 $\mu\text{g/ml}$
- 219 at a daily dosage of 60, 120, and 240 mg the mean \pm SD concentration in patients with symptomatic ventricular tachyarrhythmias (n = 9–18) was 75 \pm 46, 144 \pm 105, and 324 \pm 180 nmol/l, respectively
- 220 nonlinear kinetics
- 221 appr. 5 h after ingestion of 3 g, not associated with severe toxicity to a 27-year-old woman
- 222 slightly increased (8–12 h) in patients with impaired hepatic function; active metabolites hydroxynefazodone ($t_{1/2}$: 2–5 h), m-chlorophenylpiperazine ($t_{1/2}$: 4–10 h), and triazolidione ($t_{1/2}$: 10–12 h)
- 223 each as N-desmethyloximide; appr. methsuximide ($t_{1/2}$: 1–2 h) steady state concentration: 0.04–0.08 $\mu\text{g/ml}$
- 224 mean steady state trough concentration in 15 young adults receiving a daily dose of 0.47–1.71 mg isotretinoin/kg: 0.05–0.34 $\mu\text{g/ml}$ ($t_{1/2}$: 29 \pm 40 h), and for the 4-oxo metabolite ($t_{1/2}$: 22 \pm 10 h): 0.16–0.68 $\mu\text{g/ml}$
- 225 for depression; higher in case of schizophrenia (2–3 $\mu\text{g/ml}$?)
- 226 suggested threshold for the sum of clomipramine (0.05–0.06 $\mu\text{g/ml}$) and N-desmethylclomipramine (0.16–0.18 $\mu\text{g/ml}$): 0.2–0.24 $\mu\text{g/ml}$
- 227 for the active metabolite E-3174 ($t_{1/2}$: 4–9 h); plasma concentration of losartan producing 50% of maximal blood pressure response to exogenous angiotensin-II: 0.032 $\mu\text{g/ml}$
- 228 as ramiprilat ($t_{1/2}$: 13–17 (50–110) h)
- 229 IC_{50} level for analgesic effect after oral surgery
- 230 the inhibitory concentration to reduce the level of extracellular hepatitis B DNA by 50% varied from 2.3 ng/ml to 1.3 $\mu\text{g/ml}$
- 231 C_{max} at steady state (666 mg tid p.o.)
- 232 after oral administration of the enteric-coated tablet
- 233 trough <2 plus peak 6–10 (5–12) $\mu\text{g/ml}$
- 234 reference value; <0.015 $\mu\text{g/ml}$ urine
- 235 active metabolite 4'-hydroxynimesulide ($t_{1/2}$: 3–9 h)
- 236 C_{max} 126.5 and 226.3 ng/ml (at 2 h) after 75 and 125 mg p.o.
- 237 in patients >60 years prolonged up to 10 h
- 238 adjuvant in methadone maintenance therapy
- 239 means of the 'average' steady state plasma concentration for the relatively high dose of 250 mg q8 h appr. 0.4–0.6 $\mu\text{g/ml}$
- 240 combination of distribution and elimination processes
- 241 as active metabolite fenofibric acid
- 242 appr. 37.5 mmol/l (mval/l, mEq/l)
- 243 steady state concentration 21.6 \pm 14.2 $\mu\text{g/ml}$ (mean \pm SD) during continuous infusion of 3 g (1.1–2.2 mg/kg h) every 24 hours in 44 patients undergoing coronary artery bypass graft surgery
- 244 target trough concentration if cyclosporin (CsA) is being used at trough concentrations of 0.075–0.15 $\mu\text{g/ml}$; without CsA: appr. 0.03 $\mu\text{g/ml}$ (LC/UV assay)
- 245 4 hours after ingestion of 30–40 tiagabine HCl 8 mg tablets (coma)
- 246 bupropion plus 10-hydroxybupropion
- 247 calculated steady state concentration in children (4 months to 16 years) receiving 0.3 mg/kg b.w. i.v.
- 248 femoral blood concentration of the metabolite desmethylalimemazine after fatal intoxication: 0.2–1.3 $\mu\text{g/g}$
- 249 40–50 min after 0.15 mg/kg i.v.
- 250 femoral blood concentration of the metabolite desmethylpromethazine after fatal intoxication (n = 3): 0.3–1.8 $\mu\text{g/g}$
- 251 femoral blood concentration of the metabolite desmethyltrimipramine after fatal intoxication (n = 10): 0.3–2.5 $\mu\text{g/g}$
- 252 fatal overdose with tramadol, alprazolam (0.21 $\mu\text{g/ml}$), and alcohol (1.29 g/kg) in a 30-year-old woman
- 253 enterohepatic circulation; prolonged in elderly subjects to 33.4 hours (range: 20.0–53.4 h)
- 254 C_{min}/D [(ng/ml)/mg], i.e. dose-normalised trough plasma drug concentration, dosage interval 8 h
- 255 all data refer to the active metabolite A771726
- 256 steady state concentrations at 5, 10, and 25 mg/d, respectively
- 257 steady state trough concentrations after 400 mg/d orally; two major metabolites modafinil acid (appr. 0.5–0.8 $\mu\text{g/ml}$, $t_{1/2}$: 7.3 \pm 1.1 h) and modafinil sulfone (appr. 4.5–5.3 $\mu\text{g/ml}$), but neither appears to contribute to the wake-promoting properties of modafinil
- 258 mean plasma trough concentration at steady state obtained from 400 mg imatinib/day in 83 adult patients with chronic phase CML; peak: 2.3 $\mu\text{g/ml}$
- 259 in a 5-year-old girl
- 260 at this time (March 2003), there is insufficient evidence to recommend a general therapeutic range
- 261 active metabolite N-desethylamiodarone ($t_{1/2}$: 57–64 days), which achieves plasma concentrations similar to the parent compound
- 262 inactive metabolites deshydroxyethyl opipramol ($t_{1/2}$: 97 \pm 24 h) and opipramol N-oxide ($t_{1/2}$: 10.7 \pm 3.2 h)
- 263 as 25-hydroxyvitamin D for adults >49 years
- 264 6 h after reportedly ingestion of 30 g in a 38-year-old woman
- 265 metabolite perindoprilat, 3 to 10 hours, with a prolonged terminal half-life between 25 to 120 h
- 266 sum venlafaxine and O-desmethylvenlafaxine
- 267 for glaucoma 4–5 $\mu\text{g/ml}$
- 268 doxapram + keto-doxapram
- 269 24 h after ingestion of appr. 20 ml
- 270 active metabolite desethylamodiaquine ($t_{1/2}$: 1–10 days)
- 271 smokers: –0.0006 $\mu\text{g/ml}$

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References

- 1 Aderjan, R.; Schmitt, G.; Hofmann, S.: *Toxicchem. Krimtech.* **61**, 24 (1994)
- 2 Adkins, J. C.; Noble, S.: *Drugs* **55**, 437 (1998)
- 3 Ahearn, D. J.; Grim, C. E.: *Arch. Intern. Med.* **133**, 187 (1974)
- 4 Alderman, C. P.: *Ann. Pharmacother.* **30**, 55 (1996)
- 5 Alderman, C. P.; Lindsay, K. S. W.: *Ann. Pharmacother.* **30**, 1411 (1996)
- 6 Anderson, G. D.; Pak, C.; Doane, K. W.; Griffy, K. G.; Temkin, N. R.; Wilensky, A. J.; Winn, H. R.: *Ann. Pharmacother.* **31**, 279 (1997)
- 7 Anderson, J. L.; Reddy, C. P.; Myerburg, R. J.: *Am. J. Cardiol.* **71**, 686 (1993)
- 8 Apple, F. S.: *J. Anal. Toxicol.* **13**, 197 (1989)
- 9 Aquilonius, S.-M.; Hartvig, P.: *Clin. Pharmacokinet.* **11**, 236 (1986)
- 10 Armstrong, P. J.; Bersten, A.: *Anesth. Analg.* **65**, 536 (1986)
- 11 Arndt, G. A.; Reiss, W. G.; Bathke, K. A.; Springman, S. R.; Kenny, G.: *Clin. Pharmacol. Ther.* **53**, 224 (1993)
- 12 Arvanitis, L. A.; Miller, B. G.: *Biol. Psychiatry* **42**, 233 (1997)
- 13 ASHP: AHFS Drug information 2002. ASHP, Bethesda 2002
- 14 Asthana, S.; Greig, N. H.; Hegedus, L.; Holloway, H. H.; Raffaele, K. C.; Schapiro, M. B.; Sincrant, T. T.: *Clin. Pharmacol. Ther.* **58**, 299 (1995)
- 15 Baas, H.; Harder, S.; Burklin, F.; Demisch, L.; Fischer, P. A.: *Clin. Neuropharmacol.* **21**, 86 (1998)
- 16 Backman, J. T.; Olkkola, K. T.; Neuvonen, P. J.: *Clin. Pharmacol. Ther.* **59**, 7 (1996)
- 17 Bahal, N.; Nahata, M. C.: *Ann. Pharmacother.* **26**, 46 (1992)
- 18 Bailey, D. N.: *Clin. Toxicol.* **22**, 433 (1984)
- 19 Bailey, J. M.; Schwieger, I. M.; Hug jr., C. C.: *Anesth. Analg.* **76**, 247 (1993)
- 20 Balant-Gorgia, A. E.; Gex-Fabry, M.; Balant, L. P.: *Clin. Pharmacokinet.* **20**, 447 (1991)
- 21 Ballerini, R.; Casini, A.; Chinol, M.; Mannucci, C.; Giaccari, L.; Salvi, M.: *Int. J. Clin. Pharm. Res.* **VI**, 69 (1986)
- 22 Barbé, F.; Hansen, C.; Badonnel, Y.; Legagneur, H.; Vert, P.; Bou-troy, M. J.: *Ther. Drug Monit.* **21**, 547 (1999)
- 23 Barbhैया, R. H.; Shkha, U. A.; Chaikin, P.; Greene, D. S.; Marathe, P. H.: *Eur. J. Clin. Pharmacol.* **50**, 101 (1996)
- 23a Barnfield, C.; Kemmenoe, A. V.: *Human Toxicol.* **5**, 337 (1986)
- 24 Barone, J. A.: *Ann. Pharmacother.* **33**, 429 (1999)
- 25 Barone, J. A.; Moskovitz, B. L.; Guarnirei, J.; Hassell, A. E.; Coa-lizzi, J. L.; Bierman, R. H.; Jessen, L.: *Pharmacotherapy* **18**, 295 (1998)
- 26 Barthel, W.; Hüller, G.; Böhm, C.; Haustein, K.-O.: *Pharm. Ztg.* **141**, 4686 (1996)
- 27 Barrueto, F. Jr.; Williams, K.; Howland, M. A.; Hoffman, R. S.; Nelson, L. S.: *J. Toxicol. Clin. Toxicol.* **40**, 881 (2002)
- 28 Baselt, R. C.: *Disposition of toxic drugs and chemicals in man.* 6th ed., Biomedical Publishing, Davis 2002
- 29 Baud, F. J.; Sabouraud, A.; Vicaut, E.; Taboulet, P.; Lang, J.; Bismuth, C.; Rouzioux, J. M.; Scherrmann, J.-M.: *N. Engl. J. Med.* **332**, 642 (1995)
- 30 Baud, F. J.; Borron, S. W.; Bavoux, E.; Astier, A.; Hoffman, J. R.: *Br. Med. J.* **312**, 26 (1996)
- 31 Baumann, T. J.; Smythe, M. A.; Marikis, B.; Bivins, B. A.: *DICP Ann. Pharmacother.* **25**, 724 (1991)
- 32 Beaman, J. M.; Hackett, L. P.; Luxton, G.; Illett, K. F.: *Ann. Phar-macother.* **36**, 75 (2002)
- 33 Behrend, M.: *BioDrugs* **15**, 37 (2001)
- 34 Bernareggi, A.: *Clin. Pharmacokinet.* **35**, 247 (1998)
- 34a Berthault, F.; Kintz, P.; Tracqui, A.; Mangin, P.: *J. Anal. Toxicol.* **21**, 228 (1997)
- 35 Besson, J.-M.; Vickers, M. D.: *Drugs* **47** (Suppl. 1), 1 (1994)
- 36 Beutler, E.: *Lancet* **340**, 952 (1992)
- 37 Bever Jr., C. T.; Leslie, J.; Camenga, D. L.; Panitch, H. S.; Johnson, K. P.: *Ann. Neurol.* **27**, 421 (1990)
- 38 Bickel, U.; Thomsen, T.; Weber, W.; Fischer, J. P.; Bachus, R.; Nitz, M.; Kewitz, H.: *Clin. Pharmacol. Ther.* **50**, 420 (1991)
- 39 Biesalski, H. K.: *Dt. Arztebl.* **92**, A-1316 (1995)
- 40 Bircher, J.: *Ther. Umsch.* **34**, 830 (1977)
- 41 Bircher, J.; Sommer, W.: *Klinisch-pharmakologische Datensamm-lung.* 2. Auflage. WVG, Stuttgart 1999
- 42 Blumer, J. L.: *Clin. Pharmacokinet.* **35**, 37 (1998)
- 43 Blychert, E.; Edgar, B.; Elmfeldt, D.; Hedner, T.: *Clin. Pharmacol. Ther.* **52**, 80 (1992)
- 44 Bockbrader, H. N.: *Drugs Today* **31**, 597 (1995)
- 45 Boehnert, M. T.; Lovejoy, F. H.: *N. Engl. J. Med.* **313**, 474 (1985)
- 46 de Boer, D.; Egberts, T.; Maes, R. A.: *Pharm. World. Sci.* **21**, 47 (1999)
- 47 Bolla, S.; Boinpally, R. R.; Poondru, S.; Devaraj, R.; Jasti, B. R.: *J. Clin. Pharmacol.* **42**, 327 (2002)
- 48 Bolten, W.; Salzmann, G.; Goldmann, R.; Miehle, K.: *Z. Rheuma-tol.* **48**, 317 (1989)
- 49 Bond, A.; Seijas, D.; Dawling, S.; Lader, M.: *Addiction* **89**, 821 (1994)
- 50 Bond, G. R.; Krenzelok, E. P.; Normann, S. A.; Tendler, J. D.; Mor-ris-Kukoski, C. L.; McCoy, D. J.; Thompson, M. W.; McCarthy, T., Roblez, J.; Taylor, C.; Dolan, M. A.; Requa, R. K.; Curry, S. C.: *Clin. Toxicol.* **32**, 513 (1994)
- 50a Bondesson, U.; Hartvig, P.; Danielsson, B.: *Drug Metab. Dispos.* **9**, 376 (1981)
- 51 Boni, J.; Korth-Bradley, J.; McGoldrick, K.; Appel, A.; Cooper, S.: *J. Clin. Pharmacol.* **39**, 729 (1999)
- 52 Borenstein, M.; Shupak, R. C.; Barnette, R. E.; Cooney, G. F.; Tzeng, T.-B.: *Clin. Pharmacol. Ther.* **55**, 129 (1994)
- 53 Boruchoff, S. E.; Sturgill, M. G.; Grasing, K. W.; Seibold, J. R.; McCrea, J.; Winchell, G. A.; Kusma, S. E.; Deutsch, P. J.: *Clin. Pharmacol. Ther.* **67**, 351 (2000)
- 54 Bouillon, T.; Bartmus, D.; Schifmann, H.; Gundert-Remy, U.: *Arz-neimittelther.* **12**, 151 (1994)
- 55 Brandolese, R.; Scordo, M. G.; Spina, E.; Gusella, M.; Padriani, R.: *Clin. Pharmacol. Ther.* **70**, 391 (2001)
- 56 Breccia, A.; Ferri, E.; Girotti, S.; Bignamini, A. A.; Budini, R. A.: *Curr. Ther. Res.* **49**, 622 (1991)
- 57 Breyer-Pfaff, U.; Gaertner, H. J.: *Antidepressiva. Pharmakologie, therapeutischer Einsatz und Klinik der Depression.* WVG, Stuttgart 1987
- 58 Brier, M. E.; Zurada, J. M.; Aronoff, G. R.: *Pharm. Res.* **12**, 406 (1995)
- 59 Brodersen, H.-P.; Korsten, S.; Larbig, D.: *Dtsch. Med. Wochenschr.* **120**, 1301 (1995)
- 60 Brodie, M. J.; Dichter, M. A.: *N. Engl. J. Med.* **334**, 168 (1996)
- 61 Brook, I.: *Clin. Pharmacokinet.* **34**, 303 (1998)
- 62 Brooks, D. E.; Wallace, K. L.: *J. Toxicol. Clin. Toxicol.* **40**, 513 (2002)
- 63 Brosen, K.: *Ther. Drug Monit.* **18**, 393 (1996)
- 64 Btaiche, I. F.; Woster, P. S.: *Am. J. Health-Syst. Pharm.* **52**, 61 (1996)
- 65 Buechler, K. F.; Moi, S.; Noar, B.; McGrath, D.; Villela, J.; Clancy, M.; Shenhav, A.; Colleymore, A.; Balkirs, G.; Lee, T.; Bruni, J. F.; Walsh, M.; Hoffman, R.; Ahmuty, F.; Nowakowski, M.; Buechler, J.; Mitchell, M.; Boyd, D.; Sits, N.; Anderson, R.: *Clin. Chem.* **38**, 1678 (1992)
- 66 Burger, D. M.; Meenhorst, P. L.; Beijnen, J. H.: *Pharm. World Sci.* **17**, 25 (1995)
- 67 Burger, D. M.; Meenhorst, P. L.; ten Napel, C. H. H.; Mulder, J. W.; Henrichs, J. H.; Frissen, P. H. J.; Kroon, F. P.; Koks, C. H. W.; Bult, A.; Beijnen, J. H.: *Eur. J. Pharm. Sci.* **3**, 7 (1995)
- 68 Burgmann, H.; Winkler, S.; Uhl, F.; Feucht, M.; Hellgren, U.; Berg-qvist, Y.; Feistauer, S.; Breyer, S.; Graninger, W.: *Wien. Klin. Wochenschr.* **105**, 61 (1993)
- 69 Burke, M. J.; Harvey, A. T.; Preskorn, S. H.; DeVane, C. L.: *Am. J. Med.* **100**, 119 (1996)
- 70 Burns, C. B.; Powers, J. R.; Currie, B. J.: *Clin. Toxicol.* **32**, 527 (1994)
- 71 Butler, D. R.; Kuhn, R. J.; Chandler, M. H. H.: *Clin. Pharmacokinet.* **26**, 374 (1994)
- 72 Caccia, S.; Garattini, S.: *Clin. Pharmacokinet.* **18**, 434 (1990)
- 73 Callaghan, J. T.; Bergstrom, R. F.; Ptak, L. R.; Beasley, C. M.: *Clin. Pharmacokinet.* **37**, 177 (1999)
- 74 Calvey, T. N.; Wareing, M.; Williams, N. E.; Chan, K.: *Br. J. Clin. Pharmacol.* **7**, 149 (1979)
- 75 Cami, J.; de la Torre, R.; Ortuno, J.; Farre, M.; Mas, M.; Roset, P. N.; Segura, J.: *Eur. J. Clin. Pharmacol.* **52** (Suppl.), A168 (1997)
- 76 Challapalli, R.; Lefkowitz, J.; Topol, E. J.: *Coronary Artery Dis.* **7**, 429 (1996)
- 77 Cham, B. E.; Johns, D.; Bochner, F.; Imhoff, D. M.; Rowland, M.: *Clin. Chem.* **25**, 1420 (1979)
- 78 Chellingsworth, M. D.; Willis, J. V.; Jack, D. B.; Kendall, M. J.: *Am. J. Med.* **84** (Suppl. 3B), 72 (1988)
- 79 Cleary, J. D.; Hayman, J.; Sherwood, J.; Perez Lasala, G.; Piazza-Hepp, T.: *Ann. Pharmacother.* **27**, 715 (1993)
- 80 Cohen, H.; Francisco, D. H.: *Ann. Pharmacother.* **28**, 805 (1994)
- 81 Collins, D. M.; Gidal, B. E.; Pitterle, M. E.: *Ann. Pharmacother.* **27**, 1180 (1993)
- 82 Cook, D. G.; Peacock, J. L.; Feyerabend, C.; Carey, I. M.; Jarvis, M. J.; Anderson, H. R.; Bland, J. M.: *Br. Med. J.* **313**, 1358 (1996)
- 83 Croes, K.; Augustijns, P.; Sabbe, M.; Desmet, K.; Verbeke, N.: *Pharm. Weekbl. (Sci.)* **14**, D9 (1992)
- 84 Dager, W. E.; Albertson, T. E.: *Ann. Pharmacother.* **26**, 1287 (1992)
- 85 Dahl, S. G.: *Acta Psychiatr. Scand.* **82** (Suppl. 358), 37 (1990)
- 86 Daldrup, T.; Pier, S.: *Toxicchem. Krimtech.* **61**, 9 (1994)

- 87 Dale, O.; Hole, A.: *Vet. Hum. Toxicol.* **36**, 309 (1994)
- 88 Danziger, L. H.; Piscitelli, S. C.; Occhipinti, D. J.; Resnick, D. J.; Rodvold, K. A.: *Ann. Pharmacother.* **28**, 703 (1994)
- 89 Davies, N. M.: *Clin. Pharmacokinet.* **31**, 331 (1996)
- 90 Davies, N. M.; Anderson, K. E.: *Clin. Pharmacokinet.* **32**, 268 (1997)
- 91 Davies, N. M.; Watson, M. S.: *Clin. Pharmacokinet.* **32**, 437 (1997)
- 92 Davies, N. M.; Anderson, K. E.: *Clin. Pharmacokinet.* **33**, 184 (1997)
- 93 Davis, J. D.; Aarons, L.; Houston, J. B.: *Pharm. Res.* **11**, 1224 (1994)
- 94 Davis, R.; Whittington, R.; Bryson, H. M.: *Drugs* **53**, 608 (1997)
- 95 Dawling, S.; Flanagan, R. J.; Widdop, B.: *Hum. Toxicol.* **8**, 389 (1989)
- 96 Debailleul, G.; Abi Khalil, F.; Lheureux, P.: *J. Anal. Toxicol.* **15**, 35 (1991)
- 97 Debruyne, D.; Ryckelynck, J.-P.: *Clin. Pharmacokinet.* **24**, 10 (1993)
- 98 Debruyne, D.: *Clin. Pharmacokinet.* **33**, 52 (1997)
- 99 Deom, A.: *Ther. Umschau* **43**, 259 (1986)
- 100 Deom, A.: *Ther. Umschau* **43**, 261 (1986)
- 101 Desel, H.; Stedtler, U.; Behrens, A.; Neurath, H.: *Toxicchem. Krimtech.* **67**, 4 (2000)
- 102 DeVane, C. L.; Nemeroff, C. B.: *Clin. Pharmacokinet.* **40**, 509 (2001)
- 103 Dettloff, R. W.; Touchette, M. A.; Zarowitz, B. J.: *Ann. Pharmacother.* **27**, 781 (1993)
- 104 Dinnendahl, V.; Fricke, U. (Eds.): *Arzneistoff-Profile. Basisinformation über arzneiliche Wirkstoffe. Fortsetzungswerk. Govi, Eschborn*
- 105 Dinovo, E. C.; Gottschalk, L. A.; McGuire, F. L.; Birch, H.; Heiser, J. F.: *Clin. Chem.* **22**, 847 (1976)
- 106 Dionne, R. A.; Gordon, S. M.; Tahara, M.; Rowan, J.; Troullos, E.: *J. Clin. Pharmacol.* **39**, 131 (1999)
- 107 Divoll, M.; Greenblatt, D. J.; Lacasse, Y.; Shader, R. I.: *Psychopharmacology* **73**, 381 (1981)
- 108 Dobbs, R. J.; O'Neill, C. J. A.; Deshmukh, A. A.; Nicholson, P. W.; Dobbs, S. M.: *Clin. Pharmacokinet.* **20**, 175 (1991)
- 109 Dollery, C.: *Therapeutic drugs. Churchill Livingstone, Edinburgh* 1991
- 110 Douglas, J. G.; McLeod, M.-J.: *Clin. Pharmacokinet.* **37**, 127 (1999)
- 111 Drayer, D. E.: *Clin. Pharmacokinet.* **1**, 426 (1976)
- 112 Drayer, D. E.: *Ther. Drug Monit.* **10**, 1 (1988)
- 113 Druker, B. J.; Talpaz, M.; Resta, D. J.; Peng, B.; Buchdunger, E.; Ford, J. M.; Lydon, N. B.; Kantarjian, H.; Capdeville, R.; Ohno-Jones, S.; Sawyers, C. L.: *N. Engl. J. Med.* **344**, 1031 (2001)
- 114 Druid, H.; Holmgren, P.: *J. Forensic Sci.* **42**, 79 (1997)
- 114a Duck, B. J.; Woolias, M.: *J. Anal. Toxicol.* **9**, 177 (1985)
- 115 von Düsterlho, J.: *Dtsch. Med. Wochenschr.* **120**, 542 (1995)
- 116 Dumont, R. J.; Ensom, M. H. H.: *Clin. Pharmacokinet.* **38**, 427 (2000)
- 117 Edstein, M. D.; Veenendaal, J. R.; Scott, H. V.; Rieckmann, K. H.: *Chemotherapy* **34**, 385 (1988)
- 118 Edvardsson, N.; Varnauskas, E.: *Pharmacokinetics* **6**, 558 (1989)
- 119 Edwards, D. J.: *J. Pharm. Pract.* **IV**, 211 (1991)
- 120 El Desoky, E.; Meinshausen, J.; Bühl, K.; Engel, G.; Harings-Kaim, A.; Drewelow, B.; Klotz, U.: *Ther. Drug Monit.* **15**, 281 (1993)
- 121 El-Yazigi, A.; Chaleby, K.; Gad, A.; Raines, D. A.: *J. Clin. Pharmacol.* **35**, 17 (1995)
- 121a Elian, A. A.: *Forensic Sci. Int.* **91**, 231 (1998)
- 122 Elias-Jones, A. C.; Larcher, V. F.; Shaw, P. N.: *Pharm. Pharmacol. Lett.* **2**, 115 (1992)
- 123 Elliott, S. P.: *J. Anal. Toxicol.* **24**, 85 (2000)
- 124 Elmquist, W. F.; Riad, L. E.; Leppik, I. E.; Sawchuk, R. J.: *Pharm. Res.* **8**, 282 (1991)
- 125 Emanuelsson, B.-M.; Norsten-Höög, C.; Sandberg, R.; Sjövall, J.: *Eur. J. Pharm. Sci.* **5**, 171 (1997)
- 126 Ereshefsky, L.; Tran-Johnson, T.; Davis, C. M.; LeRoy, A.: *Clin. Chem.* **34**, 863 (1988)
- 127 Erickson, S. J.; Duncan, A.: *J. Paediatr. Child Health* **34**, 280 (1998)
- 128 Evers, J.; Eichelbaum, M.; Kroemer, H. K.: *Ther. Drug Monit.* **16**, 349 (1994)
- 129 Ezzet, F.; Krishna, G.; Wexler, D.; Statkevich, P.; Kosoglou, T.; Batra, V.: *Clin. Ther.* **23**, 871 (2001)
- 130 Ezzet, F.; Wexler, D.; Statkevich, P.; Kosoglou, T.; Patrick, J.; Lipka, L.; Mellars, L.; Veltri, E.; Batra, V.: *Clin. Pharmacol. Ther.* **41**, 943 (2001)
- 131 Faravelli, C.; Ballerini, A.; Ambonetti, A.; Broadhurst, A. D.; Das, M.: *J. Affect. Disord.* **6**, 95 (1984)
- 132 Findlay, J. W. A.; Van Wyck Fleet, J.; Smith, P. G.; Butz, R. F.; Hinton, M. L.; Blum, M. R.; Schroeder, D. H.: *Eur. J. Clin. Pharmacol.* **21**, 127 (1981)
- 133 Flanagan, R. J.: *Ann. Clin. Biochem.* **35**, 261 (1998) (www.gtfch.org/or/www.leeds.ac.uk/acb/annals)
- 134 Fleischhaker, C.; Schulz, E.; Clement, H.-W.; Krieg, C.; Remschmidt, H.: *Psychopharmakother.* **6**, 102 (1999)
- 135 Fleishaker, J. C.: *Clin. Pharmacokinet.* **39**, 413 (2000)
- 136 Fletcher, C. V.; Balfour jr., H. H.: *Pharmacotherapy* **16**, 1154 (1996)
- 137 Fletcher, C. V.; Acosta, E. P.; Henry, K.; Page, L. M.; Gross, C. R.; Kawle, S. P.; Rimmel, R. P.; Erice, A.; Balfour jr., H. H.: *Clin. Pharmacol. Ther.* **64**, 331 (1998)
- 138 Forland, S. C.; Wechter, W. J.; Witchwoot, S.; Clifford, K. H.; Arnett, R. L.; Cutler, R. E.: *J. Pharm. Pharmacol.* **48**, 546 (1996)
- 139 Forrest, A. R. W.; Marsh, I.; Bradshaw, C.; Braich, S. K.: *Lancet II*, 226 (1986)
- 140 Forsyth, D. R.; Jayasinghe, K. S. A.; Roberts, C. J. C.: *Eur. J. Clin. Pharmacol.* **35**, 85 (1988)
- 141 Fowler, P. D.; Dawes, P. T.; John, V. A.; Shotton, P. A.: *Eur. J. Clin. Pharmacol.* **31**, 469 (1986)
- 142 Fowler, P. D.; Shadforth, M. F.; Crook, P. R.; John, V. A.: *Eur. J. Clin. Pharmacol.* **25**, 389 (1983)
- 143 Foy, J. L.; Eastman, R. C.; Nealon, R. C.; Bowen, P. M.; Pengelly, M. L.; Drass, J. A.; Dorworth, T. E.; Pucino, F.: *Ann. Pharmacother.* **26**, 675 (1992)
- 144 Freeman, C. D.; Quintiliani, R.; Nightingale, C. H.: *Ann. Pharmacother.* **27**, 594 (1993)
- 145 French, J.: *Ann. Intern. Med.* **120**, 411 (1994)
- 146 Frese, J. H.; Rohland, L.; Schulz, M.; Schmoldt, A.: *Dtsch. Med. Wochenschr.* **113**, 770 (1988)
- 147 Frey, O. R.; von Brenndorf, A. I.; Probst, W.: *Ann. Pharmacother.* **32**, 300 (1998)
- 148 Friedman, D.; Weller, S.; Dix, L.: *34. Int. Conf. AAC, Abstr. A72* (1994)
- 148a Friel, P. N.; Logan, B. K.; Fligner, C. L.: *J. Anal. Toxicol.* **17**, 436 (1993)
- 149 Fulton, B.; Markham, A.: *Drugs* **51**, 278 (1996)
- 150 Fulton, B.; Benfield, P.: *Drugs* **52**, 450 (1996)
- 151 Furlanut, M.; Benetello, P.; Spina, E.: *Clin. Pharmacokinet.* **24**, 301 (1993)
- 152 Furman, W. L.; Baker, S. D.; Pratt, C. B.: *J. Clin. Oncol.* **14**, 1504 (1996)
- 153 Gaffney, P. N.; Schuckman, H. A.; Beeson, M. S.: *Ann. Pharmacother.* **32**, 1249 (1998)
- 154 Garnier, R.; Guerault, E.; Muzard, D.; Azoyan, P.; Chaumet-Riffaud, A.; Efthymiou, M.: *Clin. Toxicol.* **32**, 391 (1994)
- 155 Gelman, C. R.; Rumack, B. H.; Hess, A. J. (Eds.): *Drugdex System. Micromedex, Inc., Englewood, Colorado 01/2001-03/2003*
- 156 Gex-Fabry, M.; Balant-Gorgia, A. E.; Balant, L. P.: *Eur. J. Clin. Pharmacol.* **54**, 895 (1999)
- 157 Gilman, J. T.; Gal, P.: *Clin. Pharmacokinet.* **23**, 1 (1992)
- 158 Gillet, P.; Gavrilloff, C.; Herculien, B.; Salles, M. F.; Nicolas, A.; Netter, P.: *Fundam. Clin. Pharmacol.* **9**, 205 (1995)
- 159 Glare, P. A.; Walsh, T. D.: *Ther. Drug Monit.* **13**, 1 (1991)
- 160 Gock, S. B.; Wong, S. H. Y.; Nuwayhid, N.; Venuti, S. E.; Kelley, P. D.; Teggatz, J. R.; Jentzen, J. M.: *J. Anal. Toxicol.* **23**, 559 (1999)
- 161 Goff, D. C.; Baldessarini, R. J.: *J. Clin. Psychopharmacol.* **13**, 57 (1993)
- 162 Goggin, M.; Crowley, K.; O'Malley, K.; Barry, P.; Kelly, G.; Blake, J.: *Br. J. Anaesth.* **64**, 107 (1990)
- 163 Goldenberg, M. M.: *Clin. Ther.* **21**, 1837 (1999)
- 164 Gosciniak, H.-T.: *Psychopharmakother.* **4**, 105 (1997)
- 165 Gottschalk, L. A.; Cravey, R. H.: *Toxicological and pathological studies on psychoactive drug-involved deaths. Biomedical Publishing, Davis* 1980
- 166 Gaudins, A.; Aaron, C. K.; Linden, C. H.: *N. Engl. J. Med.* **333**, 196 (1995)
- 167 Graves, N. M.: *Ann. Pharmacother.* **27**, 1073 (1993)
- 168 Greenberg, E. R.; Baron, J. A.; Karagas, M. R.; Stukel, T. A.; Nierenberg, D. W.; Stevens, M. M.; Mandel, J. S.; Haile, R. W.: *JAMA* **275**, 699 (1996)
- 169 Greene, D. S.; Barbhuiya, R. H.: *Clin. Pharmacokinet.* **33**, 260 (1997)
- 170 Grimsley, S. R.; Jann, M. W.: *Clin. Pharm.* **11**, 930 (1992)
- 171 Gschwantler, M.; Gulz, W.; Brownstone, E.; Feichtenschlager, T.; Pulgram, T.; Schrutka-Kölbl, C.; Weiss, W.: *Wien. Klin. Wochenschr.* **105**, 500 (1993)
- 172 Gugler, R.; Fuchs, G.; Dieckmann, M.; Somogyi, A. A.: *Clin. Pharmacol. Ther.* **29**, 744 (1981)
- 173 Gutierrez, M.; Abramowitz, W.: *Pharmacotherapy* **20**, 1441 (2000)
- 174 Guiton, C.; Kinowski, J.-M.; Abbar, M.; Chabrand, P.; Bressolle, F.: *J. Clin. Pharmacol.* **39**, 721 (1999)
- 175 Hackett, L. P.; Joyce, D. A.; Hall, R. W.; Dusci, L. J.; Ilett, K. F.: *Drug Invest.* **5**, 281 (1993)
- 176 Hagen, N.; Thirlwell, M. P.; Dhaliwal, H. S.; Babul, N.; Harsanyi, Z.; Darke, A. C.: *J. Clin. Pharmacol.* **35**, 37 (1995)
- 177 Hagemeyer, K. O.; Mauro, L. S.; Mauro, V. F.: *Ann. Pharmacother.* **27**, 29 (1993)
- 178 Hakamäki, T.; Apoil, E.; Arstila, M.; Timmer, C. J.; Lehtonen, A.: *Curr. Ther. Res.* **44**, 752 (1988)

- 179 Hall, A. H.; Rumack, B. H.: *Ann. Emerg. Med.* **15**, 1067 (1986)
- 180 Hallas, J.; Davidsen, O.; Grodum, E.; Damsbo, N.; Gram, L. F.: *Respiration* **59**, 30 (1992)
- 181 Hanzlick, R. L.: *Am. J. Forensic Med. Pathol.* **5**, 11 (1984)
- 182 Harder, S.; Baas, H.; Rietbrock, S.: *Clin. Pharmacokinet.* **29**, 243 (1995)
- 183 Harder, S.; Baas, H.; Bergemann, N.; Demisch, L.; Rietbrock, S.: *Br. J. Clin. Pharmacol.* **39**, 39 (1995)
- 184 Harder, S.; Baas, H.: *Clin. Pharmacol. Ther.* **64**, 183 (1998)
- 185 Harmon, T. J.; Benitez, J. G.; Krenzelok, E. P.; Cortes-Belen, E.: *J. Toxicol. Clin. Toxicol.* **36**, 599 (1998)
- 186 Hardy, G. A.; Lafond, J.-L. V.; Mallaret, M. P.: *Ann. Pharmacother.* **35**, 386 (2001)
- 187 Hart, T. B.; Nevitt, A.; Whitehead, A.: *Lancet* **II**, 1222 (1984)
- 188 van Harten, J.: *Clin. Pharmacokinet.* **24**, 203 (1993)
- 189 den Hartigh, J.; Hilders, C. G. J. M.; Schoemaker, R. C.; Hulshof, J. H.; Cohen, A. F.; Vermeij, P.: *Clin. Pharmacol. Ther.* **54**, 415 (1993)
- 190 Hartvig, P.; Roos, B. E.; Ahs, U.; Ryde, M.: *Curr. Ther. Res.* **29**, 351 (1981)
- 191 Hartvig, P.; Valtysson, J.; Lindner, K.-J.; Kristensen, J.; Karlsten, R.; Gustafsson, L. L.; Persson, J.; Svensson, J. O.; Oye, I.; Antoni, G.; Westerberg, G.; Langström, B.: *Clin. Pharmacol. Ther.* **58**, 165 (1995)
- 192 Hay, R. H.: *Q. J. Med.* **64**, 631 (1987)
- 193 Hayes, G.; Kootsikis, M. E.: *Ann. Pharmacother.* **27**, 1389 (1993)
- 194 Haynes, G.; Brahen, N. H.; Hill, H. F.: *Can. J. Anaesth.* **40**, 286 (1993)
- 195 Härtter, S.; Baier, D.; Dingemans, J.; Ziegler, G.; Hiemke, C.: *Naunyn-Schmiedeberg's Arch. Pharmacol.* **353** (Suppl.), R154 (1996)
- 196 Heikinheimo, O.: *Clin. Pharmacokinet.* **33**, 7 (1997)
- 197 Heinroth, K. M.; Kuhn, C.; Walper, R.; Busch, I.; Winkler, M.; Prondzinsky, R.: *Dtsch. Med. Wochenschr.* **124**, 1230 (1999)
- 198 Heintz, R. C.; Stebler, T.; Lunell, N. O.; Mueller, S.; Guentert, T. W.: *J. Pharm. Med.* **3**, 57 (1993)
- 199 Hellgren, U.; Jastrebova, J.; Jerling, M.; Krysen, B.; Bergqvist, Y.: *Eur. J. Clin. Pharmacol.* **51**, 171 (1996)
- 200 Hellinger, A.; Wolter, K.; Marggraf, G.; Pentz, R.; Fritschka, E.: *Eur. J. Clin. Pharmacol.* **48**, 57 (1995)
- 201 Hellriegel, E. T.; Arora, S.; Nelson, M.; Robertson Jr., P.: *J. Clin. Pharmacol.* **42**, 450 (2002)
- 202 Hempel, V.; Lenz, G.: *Anästhes. Intensivmed.* **23**, 337 (1982)
- 203 Henry, D. W.; Burwinkle, J. W.; Klutman, N. E.: *Clin. Pharm.* **10**, 625 (1991)
- 204 Henry, J. A.: *Int. Clin. Psychopharmacol.* **6** (Suppl 6), 22 (1992)
- 205 Herben, V. M. M.; ten Bokkel Huinink, W. W.; Beijnen, J. H.: *Clin. Pharmacokinet.* **31**, 85 (1996)
- 206 Hercegovca, A.; Polonsky, J.: *Pharmazie* **54**, 479 (1999)
- 207 Herren, T.; Como, F.; Krähenbühl, S.; Wyss, P. A.: *Schweiz. Med. Wochenschr.* **123**, 1775 (1993)
- 208 Heykants, J.; Hendriks, R.; Meuldermans, W.; Michiels, M.; Scheygrond, H.; Reyntjens, H.: *Eur. J. Drug. Metab. Pharmacokinet.* **6**, 61 (1981)
- 209 Heykants, J.; Van Peer, A.; Van de Velde, V.; Snoeck, E.; Meuldermans, W.; Woestenborghs, R.: *Clin. Pharmacokinet.* **29**, 221 (1995)
- 210 Hiller, J. L.; Benda, G. I.; Rahatzad, M.; Allen, J. R.; Culver, D. H.; Carlson, C. V.: *Pediatrics* **77**, 500 (1986)
- 211 Himmelmann, A.; Hedner, T.; Snoeck, E.; Lundgren, B.; Hedner, J.: *Eur. J. Clin. Pharmacol.* **51**, 259 (1996)
- 212 Hoetelmans, R. M. W.; Burger, D. M.; Meenhorst, P. L.; Beijnen, J. H.: *Clin. Pharmacokinet.* **30**, 314 (1996)
- 213 Hoizey, G.; Souchon, P. F.; Trenque, T.; Frances, C.; Lamiable, D.; Nicolas, A.; Grossenbacher, F.; Sabouraud, P.; Bednarek, N.; Motte, J.; Millart, H.: *J. Toxicol. Clin. Toxicol.* **40**, 817 (2002)
- 214 Holm, K. J.; Spencer, C. M.: *Drugs* **59**, 1007 (2000)
- 215 Holmberg, L.; Odar-Cederlöf, I.; Boréus, L. O.; Heyner, L.; Ehrnebo, M.: *Eur. J. Clin. Pharmacol.* **22**, 175 (1982)
- 216 Hooks, M. A.: *Ann. Pharmacother.* **28**, 501 (1994)
- 217 Hoppe, M. M.; Iafate, R. P.; Hendeles, L.; Neims, A.: *Fl. J. Hosp. Pharm.* **8**, 259 (1988)
- 218 Horns, W. H.; Rado, M.; Goldstein, A.: *Clin. Pharmacol. Ther.* **17**, 636 (1975)
- 219 Horton, R. C.; Bonser, R. S.: *Br. Med. J.* **311**, 422 (1995)
- 220 Houeto, P.; Hoffman, J. R.; Imbert, M.; Levillain, P.; Baud, F. J.: *Lancet* **346**, 605 (1995)
- 221 Howard, C. E.; Roberts, R. S.; Ely, D. S.; Moye, R. A.: *Ann. Pharmacother.* **28**, 201 (1994)
- 222 Hsyu, P. H.; Singh, A.; Giargiari, T. D.; Dunn, J. A.; Ascher, J. A.; Jonhston, J. A.: *J. Clin. Pharmacol.* **37**, 737 (1997)
- 223 Huang, Y.-C.; Colaizzi, J. L.; Bierman, R. H.; Westenborghs, R.; Heykants, J. J. P.: *J. Clin. Pharmacol.* **26**, 628 (1986)
- 224 Hsu, A.; Granneman, G. R.; Bertz, R. J.: *Clin. Pharmacokinet.* **35**, 275 (1999)
- 225 Hübner, G. I.; Eismann, R.; Sziegoleit, W.: *Arzneim.-Forsch./Drug Res.* **50** (II), 936 (2000)
- 226 Hug jr., C. C.: *Anesthesiology* **74**, 390 (1991)
- 227 Hughes, J.; Gill, A. M.; Mulhearn, H.; Powell, E.; Choonara, I.: *Ann. Pharmacother.* **30**, 27 (1996)
- 228 Hui, W. K. K.; Mitchell, L. B.; Kavanagh, K. M.; Gillis, A. M.; Wyse, D. G.; Manyari, D. E.; Duff, H. J.: *J. Cardiovasc. Pharmacol.* **15**, 144 (1990)
- 229 Hukkinen, S. K.; Varhe, A.; Olkkola, K. T.; Neuvonen, P. J.: *Clin. Pharmacol. Ther.* **58**, 127 (1995)
- 230 Imbimbo, B. P.: *CNS Drugs* **15**, 375 (2001)
- 231 Inciardi, J. F.; Willits, N. H.: *Ann. Pharmacother.* **26**, 1070 (1992)
- 232 Inturrisi, C. E.; Colburn, W. A.; Kaiko, R. F.; Houde, R. W.; Foley, K. M.: *Clin. Pharmacol. Ther.* **41**, 392 (1987)
- 233 Inturrisi, C. E.; Verebely, K.: *Clin. Pharmacol. Ther.* **13**, 633 (1972)
- 234 Irey, N. S.; Froede, R. C.: *Am. J. Clin. Pathol.* **61**, 778 (1974)
- 235 Isabelle, C.; Warner, A.: *Am. J. Health-Syst. Pharm.* **56**, 555 (1999)
- 236 Iseman, M. D.: *N. Engl. J. Med.* **329**, 784 (1993)
- 237 Ishizaki, T.; Sasaki, T.; Suganuma, T.; Horai, Y.; Chiba, K.; Watanabe, M.; Asuke, W.; Hoshi, H.: *Eur. J. Clin. Pharmacol.* **18**, 407 (1980)
- 238 Iwersen, S.; Schmoldt, A.: *J. Anal. Toxicol.* **20**, 301 (1996)
- 239 Iwersen, S.; Schmoldt, A.: *Clin. Toxicol.* **34**, 223 (1996)
- 240 Jack, D. B.: *Handbook of clinical pharmacokinetic data.* Macmillan, Basingstoke 1992
- 241 Jacob, R. A.: *J. Nutr.* **120**, 1480 (1990)
- 242 Jaehde, U.; Sörgel, F.; Reiter, A.; Sigl, G.; Naber, K. G.; Schunack, W.: *Clin. Pharmacol. Ther.* **58**, 532 (1995)
- 243 Janknegt, R.: *Pharm. Weekbl. (Sci.)* **13**, 153 (1991)
- 244 Janousek, J.; Paul, T.; Reimer, A.; Kallfelz, H.-C.: *Am. J. Cardiol.* **72**, 294 (1993)
- 245 Jahaid, J. I.: *J. Clin. Pharmacol.* **34**, 286 (1994)
- 246 Johansson, E.; Agurell, S.; Hollister, L. E.; Halldin, M. M.: *J. Pharm. Pharmacol.* **40**, 374 (1988)
- 247 Johnson, M. A.; Moore, K. H. P.; Yuen, G. J.; Bye, A.; Pakes, G. E.: *Clin. Pharmacokinet.* **36**, 41 (1999)
- 248 Johnson, S. A.: *Clin. Pharmacokinet.* **39**, 5 (2000)
- 249 Jorgensen, O. S.; Lober, M.; Christiansen, J.; Gram, L. F.: *Clin. Pharmacokinet.* **5**, 386 (1980)
- 250 Jostell, K.-G.; Lapierre, Y. D.; and the Canadian Remoxipride Study Group: *Acta Psychiatr. Scand.* **82** (Suppl. 358), 48 (1990)
- 251 Josune, I.; Victoria, C. M.; Mar, A. M.; Dominguez-Gil Hurlé, A.: *Ann. Pharmacother.* **27**, 791 (1993)
- 252 Jung, D.; Griffy, K.; Wong, R.; Colburn, W.; Hulse, J.: *J. Clin. Pharmacol.* **38**, 1021 (1998)
- 253 June, H. L.; Stitzer, M. L.; Cone, E.: *Clin. Pharmacol. Ther.* **57**, 270 (1995)
- 254 Jusko, W. J.; Thomson, A. W.; Fung, J.; McMaster, P.; Wong, S. H.; Zylber-Katz, E.; Christians, U.; Winkler, M.; Fitzsimmons, W. E.; Lieberman, R.; McBride, J.; Kobayashi, M.; Warty, V.; Soldin, S. J.: *Ther. Drug Monit.* **17**, 606 (1995)
- 255 Kadoya, C.; Domino, E. F.; Matsuoka, S.: *Clin. Pharmacol. Ther.* **55**, 370 (1994)
- 256 Kahan, B. D.; Napoli, K. L.: *Transplant. Proc.* **30**, 2189 (1998)
- 257 Kaiko, R. F.; Foley, K. M.; Grabinski, P. Y.; Heidrich, G.; Rogers, A. G.; Inturrisi, C. E.; Reidenberg, M. M.: *Ann. Neurol.* **13**, 180 (1983)
- 258 Kale, P. B.; Thomson, P. A.; Provenzano, R.; Higgins, M. J.: *Ann. Pharmacother.* **27**, 866 (1993)
- 259 Kamali, F.; Edwards, C.; Rawlins, M. D.: *Br. J. Clin. Pharmacol.* **33**, 309 (1992)
- 260 Kastrissios, H.; Triggs, E. J.; Sinclair, F.; Moran, P.; Smithers, M.: *Eur. J. Clin. Pharmacol.* **44**, 555 (1993)
- 261 Kath, R.; Knauf, W. U.; Mitrou, P. S.; Rummel, M.; Höffken, K.; Peters, H. D.: *Onkologie* **1**, 614 (1995)
- 262 Kaul, S.; Shukla, U. A.; Barbhaiya, R. H.: *J. Clin. Pharmacol.* **35**, 830 (1995)
- 263 Kaye, C. M.; Nicholls, B.: *Clin. Pharmacokinet.* **39**, 243 (2000)
- 264 Kees, F.; Jehkul, A.; Bucher, M.; Mair, G.; Kiermaier, J.; Grobecker, H.: *Arzneim.-Forsch./Drug Res.* **53**, 87 (2003)
- 265 Keller, T.; Schneider, A.; Tutsch-Bauer, E.: *Forensic Sci. Int.* **109**, 159 (2000)
- 266 Kietzmann, D.; Hamm, C.; Bouillon, T.; Kettler, D.; Gundert-Remy, U.: *Naunyn-Schmiedeberg's Arch. Pharmacol.* **349** (Suppl.), R139 (1994)
- 266a Kintz, P.; Tracqui, A.; Mangin, P.; Lugnier, A. A.; Chaumont, A. J.: *J. Anal. Toxicol.* **13**, 238 (1989)
- 267 Kirk, J. K.; Dupuis, R. E.; Miles, M. V.; Gaddy, G. D.; Miranda-Massari, J. R.; Williams, D. M.: *Ther. Drug Monit.* **16**, 58 (1994)
- 268 Kirsten, R.; Nelson, K.; Kirsten, D.; Heintz, B.: *Clin. Pharmacokinet.* **34**, 457 (1998)
- 269 Kirsten, R.; Nelson, K.; Kirsten, D.; Heintz, B.: *Clin. Pharmacokinet.* **35**, 9 (1998)
- 270 Klamerus, K. J.; Maloney, K.; Rudolph, R. L.: *J. Clin. Pharmacol.* **32**, 716 (1992)

- 271 Klotz, U.; Stracciari, G. L.: *Arzneim.-Forsch./Drug Res.* **43**, 1357 (1993)
- 272 Klotz, U.; Laux, G.: *Tranquillantien*, WVG, Stuttgart 1996
- 273 Klug, E.; Schneider, V.: *Z. Rechtsmed.* **93**, 89 (1994)
- 274 Knapp, J.; Bokník, P.; Gumbinger, H.-G.; Linck, B.; Lüss, H.; Müller, F. U.; Schmitz, W.; Vahlensieck, U.; Neumann, J.: *J. Chromatogr. Sci.* **37**, 145 (1999)
- 275 Koch, A. R.; Vogelaers, D. P.; Decruyenaere, J. M.; Callens, B.; Verstraete, A.; Buylaert, W. A.: *Clin. Toxicol.* **33**, 253 (1995)
- 276 Kochak, G. M.; Page, J. G.; Buchanan, R. A.; Peters, R.; Padgett, C. S.: *J. Clin. Pharmacol.* **38**, 166 (1998)
- 276a Kopferschmitt, J.; Flesch, F.; Lugnier, A.; Sauder, P.; Jaeger, A.; Mantz, J. M.: *Hum. Toxicol.* **2**, 239 (1983)
- 277 Koren, G.: *Clin. Chem.* **43**, 222 (1997)
- 278 Kozyrskij, A.; Masih, M.; Hahn, J.; Ho, C.; Wong, M.; Sirdevan, M.: *Can. J. Hosp. Pharm.* **47**, 262 (1994)
- 279 Köppel, C.; Kristinsson, J.; Wagemann, A.; Tenczer, J.; Martens, F.: *Eur. J. Drug Metab. Pharmacokinet.* **16**, 43 (1991)
- 280 Kraemer, T.; Paul, L. D.; Jochum, C.; Maurer, H. H.: *Toxicchem. Krimtech.* **69**, 80 (2002)
- 281 Kragh Larsen, A.: *Cancer Chemother. Pharmacol.* **32**, 96 (1993)
- 282 Kretzschmar, M.: *Z. ärztl. Fortbild. Qual.sich.* **95**, 45 (2001)
- 283 Kuhs, H.; Rudolf, G. A. E.: *Psychopharmacology* **102**, 379 (1990)
- 284 Kunze, K.; Kauert, U.; Schmoldt, A.: *Vet. Hum. Toxicol.* **29** (Suppl. 2), 59 (1987)
- 285 Kuss, H. J.; Jungkunz, G.: *Prog. Neuropsychopharmacol. Biol. Psychiatry* **10**, 739 (1986)
- 286 Labbate, L. A.; Pollack, M. H.; Otto, M. W.; Tesar, G. M.; Rosenbaum, J. F.: *J. Clin. Psychopharmacol.* **14**, 274 (1994)
- 287 Lai, A. A.; Schroeder, D. H.: *J. Clin. Psychiatry* **44**, 82 (1983)
- 288 Lam, Y. W. F.; Jann, M. W.; Chang, W.-H.; Yu, H.-S.; Lin, S.-K.; Chen, H.; Davis, C. M.: *J. Clin. Pharmacol.* **35**, 128 (1995)
- 289 Lamp, K. C.; Bailey, E. M.; Rybak, M. J.: *Clin. Pharmacokinet.* **22**, 32 (1992)
- 290 Lappenberg-Pelzer, M.; Baudisch, H.: *Toxicchem. Krimtech.* **61**, 10 (1994)
- 291 Larsen, F. G.; Jakobsen, P.; Knudsen, J.; Weismann, K.; Kragballe, K.; Nielsen-Kudsk, F.: *J. Invest. Dermatol.* **100**, 623 (1993)
- 292 Latini, R.; Maggioni, A. P.; Cavalli, A.: *Clin. Pharmacokinet.* **18**, 91 (1990)
- 293 Laurijssens, B. E.; Greenblatt, D. J.: *Clin. Pharmacokinet.* **30**, 52 (1996)
- 294 Leach, J. P.; Stolarek, I.; Brodie, M. J.: *Seizure* **4**, 155 (1995)
- 295 Leach, J. P.; Brodie, M. J.: *Lancet* **351**, 203 (1998)
- 296 Leader, W. G.; Chandler, M. H. H.; Castiglia, M.: *Clin. Pharmacokinet.* **28**, 327 (1995)
- 297 Lehmann, K. A.; Freier, J.; Daub, D.: *Anaesthesist* **31**, 111 (1982)
- 298 Lehmann, K. A.; Kratzenberg, U.; Schroeder-Bark, B.; Horrichs-Haermeyer, G.: *Clin. J. Pain.* **6**, 212 (1990)
- 299 Lemmens, H. J. M.: *Clin. Pharmacokinet.* **29**, 231 (1995)
- 300 Lenderink, A. W.; Langen, M. C. J.; Schippers, D.: *Pharm. World Sci.* **16**, D8 (1994)
- 301 Lesser, I. M.; Lydiard, B.; Antal, E.; Rubin, R. T.; Ballenger, J. C.; DuPont, R.: *Am. J. Psychiatry* **149**, 1556 (1992)
- 302 Lewellen, O. R. W.; Templeton, R. T.: *Scand. J. Rheumatol. Suppl.* **14**, 53 (1976)
- 303 Lewis, L. D.; Essex, E.; Volans, G. N.; Cochrane, G. M.: *Hum. Exp. Toxicol.* **12**, 397 (1993)
- 304 Lieberman, J. A.; Cooper, T. B.; Suckow, R. F.; Steinberg, H.; Borenstein, M.; Brenner, R.; Kane, J. M.: *Clin. Pharmacol. Ther.* **37**, 301 (1985); *Ann. NY Acad. Sci.* **463**, 304 (1986)
- 305 Linder, M. W.; Keck Jr., P. E.: *Clin. Chem.* **44**, 1073 (1998)
- 306 Lindholm, A.: *Ther. Drug Monit.* **17**, 631 (1995)
- 307 Lindholm, A.; Säwe, J.: *Ther. Drug Monit.* **17**, 570 (1995)
- 308 Linnet, K.; Wiborg, O.: *Clin. Pharmacol. Ther.* **60**, 41 (1996)
- 309 Lipp, H.-P.: *Krankenhauspharm.* **17**, 388 (1996)
- 310 Lipp, H.-P.: *Krankenhauspharm.* **18**, 104 (1997)
- 311 Liu, H.; Delgado, M. R.: *Clin. Pharmacokinet.* **36**, 453 (1999)
- 312 Lode, H.: *Eur. J. Clin. Microbiol. Infect. Dis.* **10**, 807 (1991)
- 313 Lössner, A.; Banditt, P.; Tröger, U.: *Pharmazie* **56**, 50 (2001)
- 314 Lopez-Herce, J.; Bonet, C.; Meana, A.; Albajara, L.: *Ann. Pharmacother.* **29**, 995 (1995)
- 315 Lorenz, R.; Lehn, N.; Born, P.; Herrmann, M.; Neuhaus, H.: *Dtsch. Med. Wochenschr.* **121**, 223 (1996)
- 316 Lucien, J.; Dias, V. C.; LeGatt, D. F.; Yatscoff, R. W.: *Ther. Drug Monit.* **17**, 454 (1995)
- 317 Ludewig, R.: *Akute Vergiftungen*, p. 671, WVG, Stuttgart 1999
- 318 Luer, M. S.; Rhoney, D. H.: *Ann. Pharmacother.* **32**, 1173 (1998)
- 319 Lüscher, T. F.; Noll, G.; Stürmer, T.; Huser, B.; Wenk, M.: *N. Engl. J. Med.* **330**, 718 (1994)
- 320 Lyseng-Williamson, K.; Jarvis, B.: *Drugs* **61**, 1765 (2001)
- 321 Lykkesfeldt, J.; Priemé, H.; Loft, S.; Poulsen, H. E.: *Br. Med. J.* **313**, 91 (1996)
- 322 MacDonald, A.; Scarola, J.; Burke, J. T.; Zimmerman, J. J.: *Clin. Ther.* **22** (Suppl. B), B101 (2000)
- 323 MacGowan, A.; Lovering, A.; White, L.; Reeves, D.; Collins, T. A.; Oppenheim, B. A.; Wysocki, M.; Thomas, F.; Wolff, M.; de Hoog, M.; Mouton, J. W.; van den Anker, J. N.; Duffull, S. B.; Begg, E. J.; Saunders, N. J.: *Lancet* **345**, 645 (1995)
- 324 Mahalati, K.; Kahan, B. D.: *Clin. Pharmacokinet.* **40**, 573 (2001)
- 325 Mahler, Ch.; Verhelst, J.; Denis, L.: *Clin. Pharmacokinet.* **34**, 405 (1998)
- 326 Mahoney, M. C.; Connolly, B. F.; Smith, C. M.: *J. Clin. Pharmacol.* **39**, 97 (1999)
- 327 Maitre, P. O.; Vozeh, S.; Heykants, J.; Thomson, D. A.; Stanski, D. R.: *Anesthesiology* **66**, 3 (1987)
- 328 Malabanan, A.; Veronikis, I. E.; Holick, M. F.: *Lancet* **351**, 805 (1998)
- 329 Mandelli, M.; Tognoni, G.: *Clin. Pharmacokinet.* **5**, 424 (1980)
- 330 del Mar Fernandez de Gatta, M.; Calvo, V.; Hernandez, J. M.; Caballero, D.; San Miguel, J. F.; Dominguez-Gil, A.: *Clin. Pharmacol. Ther.* **60**, 332 (1996)
- 331 van der Marel, C. D.; van Lingen, R. A.; Pluim, M. A. L.; Scoones, G.; van Dijk, M.; Vaandrager, J. M.; Tibboel, D.: *Clin. Pharmacol. Ther.* **70**, 82 (2001)
- 332 Markham, A.; Faulds, D.: *Drugs* **52**, 429 (1996)
- 333 Marriner, S. E.; Morris, D. L.; Dickson, B.; Bogan, J. A.: *Eur. J. Pharmacol.* **30**, 705 (1986)
- 334 Martens, J.; Meyer, F. P.: *Pharmazie* **50**, 41 (1995)
- 335 Marzo, A.; Dal Bo, L.; Wool, C.; Cerutti, R.: *Arzneim.-Forsch./Drug Res.* **48** (II), 935 (1998)
- 335a Mason, P. E.; Kerns, W. P.: *Acad. Emerg. Med.* **9**, 730 (2002)
- 336 Mayersohn, M.; Guentert, T. W.: *Clin. Pharmacokinet.* **29**, 292 (1995)
- 337 McNeely, W.; Goa, K. L.: *Drugs* **57**, 633 (1999)
- 338 Meibohm, B.; Wegener, S.: *Krankenhauspharm.* **13**, 331 (1992)
- 339 Meyer, F. P.: *Internist. Prax.* **33**, 611 (1993)
- 340 Meyer, F. P.: *Int. J. Clin. Pharmacol. Ther.* **32**, 71 (1994)
- 341 Michaud, K.; Augsburg, M.; Romain, N.; Giroud, C.; Mangin, P.: *Forensic Sci. Int.* **105**, 185 (1999)
- 342 Michaëlsson, K.; Lithell, H.; Vessby, B.; Melhus, H.: *N. Engl. J. Med.* **348**, 287 (2003)
- 343 Michiels, M.; Hendriks, R.; Heykants, J.: *Eur. J. Drug. Metab. Pharmacokinet.* **6**, 37 (1981)
- 344 Mignon, M.; Chau, N. P.; Nguyen-Phouc, B. K.; Sauvage, M.; Leguy, F.; Bonfils, S.: *Br. J. Clin. Pharmacol.* **14**, 187 (1982)
- 345 Miljkovic, B.; Pokrajac, M.; Timotijević, I.; Varagic, V.: *Eur. J. Drug Metab. Pharmacokinet.* **21**, 251 (1996)
- 345a Milner, D. A.; Hall, M.; Davis, G. G.; Brissie, R. M.; Robinson, C. A.: *J. Anal. Toxicol.* **22**, 545 (1998)
- 346 Milton, G. V.; Jann, M. W.: *Clin. Pharmacokinet.* **28**, 494 (1995)
- 347 Mimaki, T.: *Ther. Drug Monit.* **20**, 593 (1998)
- 348 Mirfazaelian, A.; Dadashzadeh, S.; Rouini, M. R.: *Pharm. Pharmacol. Commun.* **6**, 563 (2000)
- 349 Mistry, G. C.; Jensen, B. K.; Rakhit, A.; Huselton, C. A.; Patel, I. H.: *Pharm. Res.* **12** (Suppl. 9), S-414 (1995)
- 350 Mizuno, A.; Uematsu, T.; Gotoh, S.; Katoh, E.; Nakashima, M.: *J. Pharm. Pharmacol.* **48**, 660 (1996)
- 351 Mlynarek, M. E.; Peterson, E. L.; Zarowitz, B. J.: *Ann. Pharmacother.* **30**, 219 (1996)
- 352 Moachon, G.; Kanmacher, I.; Clenet, M.; Matinier, D.: *Drugs Today* **32**, 327 (1996)
- 353 Modi, N.; Maggs, A. F.; Clarke, C.; Chapman, C.; Swann, R. A.: *Lancet* **352**, 70 (1998)
- 354 Moffat, A. C.; Jackson, J. V.; Moss, M. S.; Widdop, B.: *Clarke's isolation and identification of drugs in pharmaceuticals, body fluids, and post-mortem material*. 2nd ed., Pharmaceutical Press, London 1986
- 355 Möller Jensen, K.; Berg Dahl, J.: *Arzneim.-Forsch./Drug Res.* **44**, 951 (1994)
- 356 von Moltke, L. L.; Greenblatt, D. J.; Shader, R. I.: *Clin. Pharmacokinet.* **24**, 141 (1993)
- 357 Mordel, A.; Halkin, H.; Zulty, L.; Almog, S.; Ezra, D.: *Clin. Pharmacol. Ther.* **53**, 457 (1993)
- 358 Morse, G. D.; Shelton, M. J.; O'Donnell, A. M.: *Clin. Pharmacokinet.* **24**, 101 (1993)
- 359 Moser, M.; Buchberger, W.: *Wien. Klin. Wochenschr.* **105**, 497 (1993)
- 360 Mukherjee, A.; Le, K.; Lieberman, R.: *Clin. Pharmacol. Ther.* **55**, 149 (1994)
- 361 Müller, N.; Kapfhammer, H.-P.; Spatz, R.; Hippus, H.: *Dt. Ärztebl.* **92**, C-236 (1995)
- 362 Murphy, J. M.; Motiwala, R.; Devinsky, O.: *S. Med. J.* **84**, 1199 (1991)
- 363 Myrenfors, P. G.; Eriksson, T.; Sandstedt, C. S.; Sjöberg, G.: *J. Intern. Med.* **233**, 113 (1993)

- 364 Netter, P.; Bannwarth, B.; Lopicque, F.; Harrewyn, J.-M.; Frydman, A.; Tamisier, J.-N.; Gaucher, A.; Jean, R.: *Clin. Pharmacol. Ther.* **42**, 555 (1987)
- 365 Neuvonen, P. J.; Pohjola-Sintonen, S.; Tacke, U.; Vuori, E.: *Lancet* **342**, 1419 (1993)
- 366 Neuvonen, P. J.; Varhe, A.; Olkkola, K. T.: *Clin. Pharmacol. Ther.* **60**, 326 (1996)
- 367 Nichols, M. H.; King, W. D.; James, L. P.: *Ann. Emerg. Med.* **29**, 511 (1997)
- 368 Niebch, G.; Borbe, H. O.; Hummel, T.; Kobal, G.: *Arzneim.-Forsch./Drug Res.* **42**, 1343 (1992)
- 369 Nielsen, J. C.; Bjerring, P.; Arendt-Nielsen, L.: *Br. J. Clin. Pharmacol.* **31**, 267 (1991)
- 370 Nilsen, O. G.: *Clin. Pharmacokinet.* **26**, 16 (1994)
- 371 N. N.: *Bundesgesundhbl.* **41** (6), 271 (1998)
- 372 N. N.: *Bundesgesundhbl.* **41** (6), 270 (1998)
- 373 Noble, S.; Balfour, J. A.: *Drugs* **51**, 424 (1996)
- 374 Nudelman, E.; Vinuela, L. M.; Cohen, C. I.: *J. Clin. Psychiatry* **59**, 433 (1998)
- 375 Nulman, I.; Berkeovitch, M.; Klein, J.; Pastuszek, A.; Lester, R. S.; Shear, N.; Koren, G.: *J. Clin. Pharmacol.* **38**, 926 (1998)
- 376 Ochs, H. R.; Gugler, R.: *Internist* **25**, 336 (1984)
- 377 Oellerich, M.; Armstrong, V. W.; Kahan, B.; Shaw, L.; Holt, D. W.; Yatscoff, R.; Lindholm, A.; Halloran, P.; Gallicano, K.; Wonigeit, K.; Schütz, E.; Schran, H.; Annesley, T.: *Ther. Drug Monit.* **17**, 642 (1995)
- 378 Oellerich, M.; Sybrecht, G. W.; Klein, H.: *Internist* **23**, 174 (1982)
- 379 Oertel, R.; Rahn, R.; Kirch, W.: *Clin. Pharmacokinet.* **33**, 417 (1997)
- 380 Öström, M.; Eriksson, A.; Throson, J.; Spigset, O.: *Lancet* **348**, 339 (1996)
- 381 Ohkubo, T.; Osanai, T.; Sugawara, K.; Ishida, M.; Otani, K.; Mihara, K.; Yasu N.: *J. Pharm. Pharmacol.* **47**, 340 (1995)
- 382 Ohlsson, A.; Lindgren, J.-E.; Wahlen, A.; Agurell, S.; Hollister, L. E.; Gillespie, H. K.: *Clin. Pharmacol. Ther.* **28**, 409 (1980)
- 383 Oikkonen, M.; Kärkelä, J.; Seppälä, T.: *Eur. J. Clin. Pharmacol.* **47**, 445 (1995)
- 384 Okonkwo, P. O.; Ogbuokiri, J. E.; Ofoegbu, E.; Klotz, U.: *Clin. Pharmacol. Ther.* **53**, 426 (1993)
- 385 Osselton, M. D.; Hammond, M. D.; Moffat, A. C.: *J. Forensic Sci. Soc.* **20**, 187 (1980)
- 386 Overo, K. F.: *Eur. J. Clin. Pharmacol.* **14**, 69 (1978)
- 387 Overo, K. F.: *Prog. Neuropsychopharmacol. Biol. Psychiat.* **6**, 311 (1982)
- 388 Overo, K. F.: *Psychopharmacol.* **86**, 253 (1985)
- 389 Paap, C. M.; Nahata, M. C.: *DICP Ann. Pharmacother.* **23**, 646 (1989)
- 390 Paintaid, G.; Alván, G.; Berninger, E.; Gustafsson, L. L.; Idrizbegovic, E.; Karlsson, K. K.; Wakelkamp, M.: *Clin. Pharmacol. Ther.* **55**, 317 (1994)
- 391 Pak, C. Y. C.; Sakhaee, K.; Rubin, C. D.; Zerwekh, J. E.: *Am. J. Med. Sci.* **313**, 23 (1997)
- 391a Palmer, R. B.; Alakiya, P.; Baca, J. E. C.; Nolte, K. B.: *J. Forensic Sci.* **44**, 851 (1999)
- 392 Pass, S. E.; Miyagawa, C. I.; Healy, D. P.; Ivey, T. D.: *Ann. Pharmacother.* **35**, 409 (2001)
- 393 Paterson, S. C.: *Forensic Sci. Int.* **27**, 129 (1985)
- 394 Pecar, A.; Lindner, W.; Mönch, V.; Münch, G.; Roos, R.: *Krankenhauspharmazie* **13**, 591 (1992)
- 395 Pentz, B.; Strubelt, O.; Gehlhoff, C.: *Dt. Ärztebl.* **43**, 2815 (1979)
- 396 Perel, J. M.: *Clin. Chem.* **34**, 881 (1988)
- 397 Perez-Reyes, M.; Jeffcoat, A. R.: *Life Sci.* **51**, 553 (1992)
- 398 Perucca, E.; Grimaldi, R.; Crema, A.: *Clin. Pharmacokinet.* **10**, 498 (1985)
- 399 Perruca, E.; Bialer, M.: *Clin. Pharmacokinet.* **31**, 29 (1996)
- 400 Peruche, B.; Schulz, M.: *Pharm. Ztg.* **141**, 1396 (1996)
- 401 Peruche, B.; Schulz, M.: *Pharm. Ztg.* **141**, 2920 (1996)
- 402 Peters, D. H.; Friedel, H. A.; McTavish, D.: *Drugs* **44**, 750 (1992)
- 403 Philbin, D. M.; Rosow, C. E.; Schneider, R. C.; Koski, G.; D'Ambr, M. N.: *Anesthesiology* **74**, 389 (1991)
- 404 Phillips, B. A.; Chrystyn, H.: *Pharm. J.* **247**, R18 (1991)
- 405 Pisano, P.; Durand, A.; Autret, E.; Desnuelle, C.; Pinsard, N.; Serratrice, G.; Legout, V.; Jourbert, M.; Blin, O.: *Eur. J. Clin. Pharmacol.* **51**, 167 (1996)
- 406 Piscitelli, S. C.; Occhipinti, D. J.; Danziger, L. H.; Hill, C.; West, D. P.; Fischer, J. H.: *Ann. Pharmacother.* **27**, 1526 (1993)
- 407 Pitt, B.; Berry, H.: *Postgrad. Med. J.* **67**, 323 (1991)
- 407a Plomp, T. A.; Battista, H. J.; Unterdorfer, H.; van Ditmarsch, W. C.; Maes, R. A.: *Arch. Toxicol.* **48**, 245 (1981)
- 408 Pollak, P. T.; Zbuk, K.: *Clin. Pharmacol. Ther.* **68**, 92 (2000)
- 409 Pond, S. M.; Armstrong, J. G.; Hederson, A.: *Lancet* **342**, 687 (1993)
- 410 Poortman, A. J.; Lock, E.: *Forensic Sci. Int.* **100**, 221 (1999)
- 411 Porras, A. G.; Holland, S. D.; Gertz, B. J.: *Clin. Pharmacokinet.* **36**, 315 (1999)
- 412 Posner, J.; Bye, A.; Dean, K.; Peck, A. W.; Whiteman, P. D.: *Eur. J. Clin. Pharmacol.* **29**, 97 (1985)
- 413 Potkin, S. G.; Shen, Y.; Pardes, H.; Phelps, B. H.; Zhou, D.; Shu, L.; Korpi, E.; Wyatt, R. J.: *Psychiatry Res.* **12**, 167 (1984)
- 414 Pottier, J.; Cousty-Berlin, D.; Busigny, M.: *Rheumatology* **7**, 70 (1982)
- 415 Preskorn, S. H.; Fast, G. A.: *J. Clin. Psychiatry* **52** (Suppl. 6), 23 (1991)
- 416 Privitera, M. D.: *Ann. Pharmacother.* **27**, 1169 (1993)
- 417 Raber, J. H.; Shinar, C.; Finkelstein, S.: *Ann. Pharmacother.* **27**, 719 (1993)
- 418 Radwanski, E.; Holbert, J.; Sychowicz, S.; Zampaglione, N.: *J. Clin. Pharmacol.* **27**, 530 (1987)
- 419 Rambeck, B.; Wolf, P.: *Clin. Pharmacokinet.* **25**, 433 (1993)
- 420 Rathore, S. S.; Curtis, J. P.; Wang, Y.; Bristow, M. R.; Krumholz, H. M.: *JAMA* **289**, 871 (2003)
- 421 Rayner, C. R.; Galbraith, K. J.; Marriott, J. L.; Duncan, G. J.: *Ann. Pharmacother.* **36**, 1230 (2002)
- 422 Reeker, W.; Schneider, G.; Felgenhauer, N.; Tempel, G.; Kochs, E.: *Dtsch. Med. Wochenschr.* **125**, 249 (2000)
- 423 Regenthal, R.; Krüger, M.; Köppel, C.; Preiß, R.: *Anästhesiol. Intensivmed.* **40**, 129 (1999)
- 424 Reiter, P. D.; Stiles, A. D.: *Ann. Pharmacother.* **27**, 727 (1993)
- 425 Renshaw, P. F.; Guimaraes, A. R.; Fava, M.; Rosenbaum, J. F.; Pearlman, J. D.; Flood, J. G.; Puopolo, P. R.; Clancy, K.; Gonzalez, R. G.: *Am. J. Psychiatry* **149**, 1592 (1992)
- 426 Repetto, M. R.; Repetto, M.: *Clin. Toxicol.* **35**, 345 (1997)
- 427 Repetto, M. R.; Repetto, M.: *Clin. Toxicol.* **35**, 1 (1997)
- 428 Repetto, M. R.; Repetto, M.: *Clin. Toxicol.* **36**, 287 (1998)
- 429 Repetto, M. R.; Repetto, M.: *Clin. Toxicol.* **37**, 1 (1999)
- 430 Reuman, P. D.; Neiberger, R.; Kondor, D. A.: *Pediatr. Infect. Dis. J.* **11**, 132 (1992)
- 431 Rey, E.; Tréluyer, J.-M.; Pons, G.: *Clin. Pharmacokinet.* **36**, 409 (1999)
- 432 Richter, O.; Ern, B.; Reinhardt, D.; Becker, B.: *Pediatr. Pharmacol.* **3**, 329 (1983)
- 433 Riesselmann, B.; Rosenbaum, F.; Roscher, S.; Schneider, V.: *Forensic Sci. Int.* **103**, S49 (1999)
- 434 Rindone, J. R.; Sloane, E. P.: *Ann. Pharmacother.* **26**, 515 (1992)
- 435 Rochdi, M.; Sabouraud, A.; Baud, F. J.; Bismuth, C.; Scherrmann, J. M.: *Hum. Exp. Toxicol.* **11**, 510 (1992)
- 436 Rodvold, K. A.; Gotfried, M. H.; Danziger, L. H.; Servi, R. J.: *Antimicrob. Agents Chemother.* **41**, 1399 (1997)
- 437 Rodvold, K. A.: *Clin. Pharmacokinet.* **37**, 385 (1999)
- 438 Rogers, S. L.; Friedhoff, L. T.; and the Donepezil Study Group: *Dementia* **7**, 293 (1996)
- 439 Romano, M. J.; Gaylor, A.; Sang Jr., C. J.: *Pharmacother.* **22**, 766 (2002)
- 440 Rooney, M.; Massey, K. L.; Jamali, F.; Rosin, M.; Thomson, D.; Johnson, D. H.: *J. Clin. Pharmacol.* **36**, 760 (1996)
- 441 Roots, I.: *Internist* **27**, 40 (1986)
- 442 Rose, S. R.: *Am. J. Hosp. Pharm.* **51**, 3065 (1994)
- 443 Rosenkranz, B.; Frölich, J. C.: *Dtsch. Ärztebl.* **82**, B-1769 (1985)
- 443a Saito, T.; Takeichi, S.; Nakajima, Y.; Yukawa, N.; Osawa, M.: *J. Anal. Toxicol.* **21**, 584 (1997)
- 444 Saivin, S.; Hulot, T.; Chabac, S.; Potgieter, A.; Durbin, P.; Houin, G.: *Clin. Pharmacokinet.* **35**, 331 (1998)
- 445 Salazar, D. E.; Marathe, P. H.; Fulmor, I. E.; Lee, J. S.; Raymond, R. H.; Uderman, H. D.: *J. Clin. Pharmacol.* **35**, 1109 (1995)
- 446 Salkowski, A. A.; Penney, D. G.: *Vet. Hum. Toxicol.* **36**, 455 (1994)
- 447 Sanathanan, L. P.; Peck, C. C.: *Controlled Clin. Trials* **12**, 780 (1991)
- 448 Sanquer, S.; Breil, M.; Baron, C.; Dahmane, D.; Astier, A.; Lang, P.: *Lancet* **351**, 1557 (1998)
- 449 Sauro, S. C.; DeCarolis, D. D.; Pierpont, G. L.; Gornick, C. C.: *Ann. Pharmacother.* **36**, 1682 (2002)
- 450 Sawyer, C. A.; Baker, A. B.; Ramzan, I.; Regaglia, F.: *J. Clin. Pharmacol.* **38**, 160 (1998)
- 451 Schall, U.; Katta, T.; Pries, E.; Klöppel, A.; Gaspar, M.: *Dt. Ärztebl.* **91**, C-556 (1994)
- 452 Schaller, K.-H.; Angerer, H.; Lehnert, G.: *Dt. Ärztebl.* **90**, C-1430 (1993)
- 453 Schapel, G. J.; Beran, R. G.; Vajda, F. J. E.; Berkovic, S. F.; Mashford, M. L.; Dunagan, F. M.; Yuen, W. C.; Davies, G.: *J. Neurol. Neurosurg. Psychiatry* **56**, 448 (1993)
- 454 Schentag, J. J.; Nix, D. E.; Adelman, M. H.: *DICP Ann. Pharmacother.* **25**, 1050 (1991)
- 455 Schjöldt, F. V.; Ott, P.; Christensen, E.; Bondesen, S.: *Clin. Pharmacol. Ther.* **71**, 221 (2002)
- 456 Schmid, I.; Paulweber, B.; Pechböck, W.; Oberkofler, H.; Patsch, W.: *Toxicchem. Krimtech.* **67**, 96 (2000)
- 457 Schmidt, N.; Sittl, R.; Brune, K.; Geisslinger, G.: *Pharm. Res.* **10**, 441 (1993)

- 458 Schmoldt, A.; Schulz, M.; Frese, J. H.: In Bauer, G. (ed.): *Gerichtsmedizin. Festschrift für Wilhelm Holzabek*, p. 529, Franz Deuticke, Wien 1998
- 459 Schmoldt, A.; Iwersen, S.; Schlüter, W.: *Clin. Toxicol.* **35**, 405 (1997)
- 460 Scholz, J.; Bause, H.; Schulz, M.; Klotz, U.; Krishna, D. R.; Pohl, S.; Schulte am Esch, J.: *Br. J. Clin. Pharmacol.* **38**, 369 (1994)
- 461 Scholz, J.; Schulz, M.; Steinfath, M.; Höver, S.; Bause, H.: *J. Mol. Med.* **73**, 145 (1995)
- 462 Scholz, J.; Steinfath, M.; Schulz, M.: *Clin. Pharmacokinet.* **31**, 275 (1996)
- 463 Schulz, J.: *Pharm. Ztg.* **137**, 1626 (1992)
- 464 Schulz, M.; Schmoldt, A.: *ZAC Zeitschr. antimikr. antineopl. Chemother.* **10**, 33 (1992)
- 465 Schulz, M.; Schmoldt, A.; Donn, F.; Becker, H.: *Eur. J. Clin. Pharmacol.* **34**, 633 (1988)
- 466 Schulz, M.; Meyer, W.; Schmitz, W.; Scholz, J.; Schmoldt, A.: *Arzneimittelther.* **7**, 169 (1989)
- 467 Schulz, M.; Schmoldt, A.: *Pharmazie* **49**, 614 (1994)
- 468 Schulz, M.; Schmoldt, A.: *Anaesthesist* **43**, 835 (1994)
- 469 Schulz, M.; Schmoldt, A.: *Pharmazie* **52**, 895 (1997)
- 470 Schulz, M.; Peruche, B.: *Pharm. Ztg.* **139**, 3346 (1994)
- 471 Schwab, M.; Oetzel, C.; Jäggle, C.; Mörke, K.; Gleiter, C. H.; Eichelbaum, M.: *Naunyn-Schmiedeberg's Arch. Pharmacol.* **363** (Suppl.), R 132 (2001)
- 472 Schwietert, H. R.; Peeters, P. A. M.; Dingemans, J.; Thiercelin, J.F.; Necciarri, J.; de Bruin, H.; Jonkman, J. H. G.: *Eur. J. Clin. Pharmacol.* **51**, 175 (1996)
- 473 Scott, D. B.; Lee, A.; Fagan, D.: *Anesth. Analg.* **69**, 563 (1989)
- 474 Scott, L. J.; Goa, K. L.: *Drugs* **60**, 1095 (2000)
- 475 Shannon, M.: *Ann. Intern. Med.* **119**, 1161 (1993)
- 476 Shibata, N.; Kitamura, A.; Yoshikawa, Y.; Inoue, T.; Bamba, T.; Takada, K.: *Pharm. Pharmacol. Commun.* **6**, 501 (2000)
- 477 Shinn, A. F.: *Drug Saf.* **7**, 245 (1992)
- 477a Shrestha, M.; Hendrickson, R. G.; Henretig, F. M.: *Clin Toxicol.* **39**, 282 (2001)
- 478 Simons, F. E. R.; Bergman, J. N.; Watson, W. T. A.: *J. Allergy Clin. Immunol.* **98**, 1062 (1996)
- 479 Sindrup, S. H.; Gram, L. F.; Broesen, K.; Eshoj, O.; Mogensen, E. F.: *Pain* **42**, (1990)
- 480 Sindrup, S. H.; Grodum, E.; Gram, L. F.; Beck-Nielsen, H.: *Ther. Drug. Monit.* **13**, 408 (1991)
- 481 Singer, A. J.; Mofenson, H. C.; Caraccio, T. R.; Ilasi, J.: *Clin. Toxicol.* **32**, 577 (1994)
- 482 Singleton, M. A.; Rosen, J. I.; Fisher, D. M.: *Can. J. Anaesth.* **34**, 152 (1987)
- 483 Sivenius, J.; Kalviainen, R.; Ylinen, A.: *Epilepsia* **32**, 539 (1991)
- 484 Skeith, K. J.; Brocks, D. R.: *Clin. Pharmacokinet.* **26**, 233 (1994)
- 485 Slain, D.; Roger, P. D.; Cleary, J. D.; Chapman, S. W.: *Ann. Pharmacother.* **35**, 720 (2001)
- 486 Smialek, J. E.; Levine, B.; Chin, L.: *J. Forensic. Sci.* **39**, 159 (1994)
- 487 Smilkstein, M. J.; Douglas, D. R.; Daya, M. R.; Davie, A.; Whitcomb, D. C.; Cheung, L.; Meyer, K. C.: *N. Engl. J. Med.* **331**, 1310 (1994)
- 487a Snook, J.; Burrell-Boothman, D.; Watkins, J.; Colin-Jones, D.: *Brit. J. Clin. Pract.* **42**, 257 (1988)
- 488 Sommerburg, C.; Bauer, R.; Orfanos, C. E.; Petres, J.; Thiele, B.; Ulrich, R. E. H.: *Dt. Dermatol.* **42**, 1316 (1994)
- 489 Sonntag, O.: *Arzneimittel-Interferenzen*. Thieme, Stuttgart New York 1985
- 490 Spencer, C. M.; Goa, K. L.: *Drugs* **50**, 176 (1995)
- 491 Spector, R.; Park, G. D.; Johnson, G. F.; Vesell, E. S.: *Clin. Pharmacol. Ther.* **43**, 345 (1988)
- 492 Stanek, E. J.; Nelson, C. E.; DeNofrio, D.: *Ann. Pharmacother.* **31**, 853 (1997)
- 493 Stanley, T. H.; Bailey, P. L.: *Anesthesiology* **74**, 388 (1991)
- 494 Staß, H.; Peltola, H.; Kuhlmann, J.; Rahm, V.: *Naunyn-Schmiedeberg's Arch. Pharmacol.* **353** (Suppl.), R153 (1996)
- 495 Stead, A. H.; Moffat, A. C.: *Hum. Toxicol.* **3**, 437 (1983)
- 496 Stefan, H.: *Dt. Ärztebl.* **95**, C-2204 (1998)
- 496a Stein, S.; Schmoldt, A.; Schulz, M.: *Forensic Sci. Int.* **113**, 449 (2000)
- 497 Stein, U.; Steinecke, H.; Pragst, F.; Prügel, M.; Ulrich, P.; Gondro, T.: *Toxicchem. Krimtech.* **66**, 129 (1999)
- 498 Steinecke, H.; Stein, U.; Lampe, J.; Kluge, S.; Hentschel, H.; Muth, G.: *Toxicchem. Krimtech.* **66**, 100 (1999)
- 499 Steiner, J. F.: *Clin. Pharmacokinet.* **30**, 16 (1996)
- 499a Steentoft, A.; Worm, K.: *J. Forensic Sci. Soc.* **34**, 181 (1994)
- 500 Stewart, B. H.; Kugler, A. R.; Thompson, P. R.; Bockbrader, H. N.: *Pharm. Res.* **19**, 276 (1993)
- 501 Stimmel, G. L.; Dopheide, J. A.; Stahl, S. M.: *Pharmacotherapy* **17**, 10 (1997)
- 502 Stockis, A.; Deroubaix, X.; Jeanbaptiste, B.; Lins, R.; Allemon, A. M.; Laufen, H.: *Arzneim.-Forsch./Drug. Res.* **45**, 1009 (1995)
- 503 Stork, C. M.; Hoffman, R. S.: *Clin. Toxicol.* **32**, 583 (1994)
- 504 Stoschitzky, K.; Kahr, S.; Donnerer, J.; Schumacher, M.; Luha, O.; Maier, R.; Klein, W.; Lindner, W.: *Clin. Pharmacol. Ther.* **57**, 543 (1995)
- 505 Strehl, E.: *Krankenhauspharm.* **21**, 293 (2000)
- 506 Strenkoski-Nix, L. C.; Ermer, J.; DeCleene, S.; Cevallos, W.; Mayer, P. R.: *Am. J. Health-Syst. Pharm.* **57**, 1499 (2000)
- 507 Sturmer, W. Q.; Garriott, J. C.: *J. Forensic Sci.* **17**, 440 (1972)
- 508 Sullivan, P.; Bekir, S.; Jaffar, Z.; Page, C.; Jeffery, P.; Costello, J.: *Lancet* **343**, 1006 (1994)
- 509 Sweet, R. A.; Pollock, B. G.; Kirshner, M.; Wright, B.; Altieri, L. P.; DeVane, C. L.: *J. Clin. Pharmacol.* **35**, 876 (1995)
- 510 Sweetman, S. C. (ed.): *Martindale. The complete drug reference*. 33rd ed., Pharmaceutical Press, London 2002
- 511 Takahara, S.; Kokado, Y.; Kameoka, H.; Takano, Y.; Jiang, H.; Moutabarrik, A.; Ishibashi, M.; Okuyama, A.; Sonoda, T.: *Transplant. Proc.* **26**, 2106 (1994)
- 512 Tarbah, F. A.; Zweipfennig, P.; Pier, S.; Temme, O.; Daldrup, T.: *Toxicchem. Krimtech.* **68**, 21 (2001)
- 513 Tegeder, I.; Bremer, F.; Oelkers, R.; Schüttler, J.; Brune, K.; Geisslinger, G.: *Naunyn-Schmiedeberg's Arch. Pharmacol.* **355** (Suppl.), R129 (1996)
- 514 Terhaag, B.; Grünert, A.; Richter, K.; Bahlmann, G.; Gloris, A.: *Z. Klin. Med.* **42**, 1463 (1987)
- 515 Terhaag, B.; Möbus, U.; Oertel, R.; Richter, K.; Feller, K.: *medicamentum* **2**, 40 (1992)
- 516 Terra, S. G.; Washam, J. B.; Dunham, G. D.; Gattis, W. A.: *Pharmacotherapy* **19**, 1123 (1999)
- 517 Theisohn, M.; Heimann, G.: *Eur. J. Clin. Pharmacol.* **22**, 545 (1982)
- 518 Thiermann, H.; Mast, U.; Eyer, P.; Hibler, A.; Pfaf, R.; Felgenhauer, J.; Zilker, T.: *Naunyn-Schmiedeberg's Arch. Pharmacol.* **353** (Suppl.), R146 (1996)
- 519 Tomson, T.; Johannessen, S. I.: *Eur. J. Clin. Pharmacol.* **55**, 697 (2000)
- 520 Tonkin, A. L.; Bochner, F.: *Clin. Pharmacokinet.* **27**, 169 (1994)
- 520a Tracqui, A.; Kintz, P.; Ludes, B.: *J. Anal. Toxicol.* **22**, 430 (1998)
- 521 Traeger, S. M.; Haug III, M. T.: *Clin. Toxicol.* **24**, 329 (1986)
- 522 Troupin, A. S.; Montouris, G.; Hussein, G.: *J. Epilepsy* **10**, 26 (1997)
- 523 Tse, F. L. S.; Jaffe, J. M.: *Eur. J. Clin. Pharmacol.* **32**, 361 (1987)
- 524 Tune, L.; Coyle, J. T.: *Arch. Gen. Psychiatry* **37**, 293 (1980)
- 525 Ufkes, J. G. R.; de Vos, J. W.; Geerlings, P. J.; van Wilgenburg, H.: *Pharm. World. Sci.* **16** (Suppl.), D 6 (1994)
- 526 Ufkes, J. G. R.; de Vos, J. W.; van Brussel, G. H. A.: *Pharm. World. Sci.* **20**, 83 (1998)
- 527 Uges, D. R. A.: *Pharm. Weekbl.* **130**, 180 (1995)
- 528 Uges, D. R. A. (Ed.): *Orientierende Angaben zu therapeutischen und toxischen Konzentrationen von Arzneimitteln und Giften in Blut, Serum oder Urin*. VCH, Weinheim 1990, and: *Therapeutic and Toxic Drug Concentration List*. www.tiaft.org/members 'or' www.gtfc.org/intern, searched October 2002.
- 529 Ujhelyi, M. R.; Colucci, R. D.; Cummings, D. M.; Green, P. J.; Robert, S.; Vlasses, P. H.; Zarowitz, B. J.: *DICP Ann. Pharmacother.* **25**, 1047 (1991)
- 530 Ulrich, S.; Wurthmann, C.; Brosz, M.; Meyer, F. P.: *Clin. Pharmacokinet.* **34**, 227 (1998)
- 531 Ulrich, S.; Meyer, F. P.: *Psychopharmakother.* **6**, 100 (1999)
- 532 Ulrich, S.; Danos, P.; Müller, D.; Lehmann, D.; Leschinger, A.; Treuheit, T.-O.; Partsch, G.; Wolter, M.; Pester, U.: *Eur. J. Clin. Pharmacol.* **55** (3), A25 (1999)
- 533 Undre, N.; Möller, A.; The FK 506 European Study Group: *Transpl. Int.* **7** (Suppl. 1), S-15 (1994)
- 534 USP DI: Volume I – drug information for the health care professional, 23rd ed., US Pharmacopoeial Convention Inc., Micromedex Inc., Englewood 2003
- 535 Vale, J. A.; Proudfoot, A. T.: *Lancet* **346**, 547 (1995)
- 536 Vandenberg, R. H. G.; Wierda, J. M. K. H.: *Anesthesiology* **69**, 996 (1988)
- 537 Vaughan Williams, E. M.: *J. Clin. Pharmacol.* **32**, 964 (1992)
- 538 Venkataramanan, R.; Lever, J.; Jain, A.; Burckart, G.; Flowers, J.; Warty, V.; Fung, J.; Todo, S.; Starzl, T.: *Pharm. Res.* **10** (Suppl.), S-390 (1993)
- 539 Venkataramanan, R.; Swaminathan, A.; Prasad, T.; Jain, A.; Zuckerman, S.; Warty, V.; McMichael, J.; Lever, J.; Burckart, G.; Starzl, T.: *Clin. Pharmacokinet.* **29**, 404 (1995)
- 540 Venkataramanan, R.; Shaw, L. M.; Sarkozi, L.; Mullins, R.; Pirsch, J.; MacFarlane, G.; Scheller, D.; Ersfeld, D.; Frick, M.; Fitzsimmons, W. E.; Virji, M.; Jain, A.; Braymann, K. L.; Shaked, A.: *J. Clin. Pharmacol.* **41**, 542 (2001)
- 541 Wada, D. R.; Mandema, J. W.: *Pharm. Res.* **11** (Suppl.), S-424 (1994)
- 542 Wagner, M. L.: *Am. J. Hosp. Pharm.* **51**, 1657 (1994)
- 543 Wallemacq, P. E.; Verbeeck, R., K.: *Clin. Pharmacokinet.* **40**, 283 (2001)

- 544 Walsh, S. L.; Preston, K. L.; Stitzer, M. L.; Cone, E. J.; Bigelow, G. E.: *Clin. Pharmacol. Ther.* **55**, 569 (1994)
- 545 Wang, G. Z.; Maranelli, G.; Perbellini, L.: *Int. Arch. Occup. Environ. Health* **65**, 285 (1994)
- 546 Wang, S.; Schram, I. M.; Sund, R. B.: *Eur. J. Pharm. Sci.* **3**, 231 (1995)
- 547 Watling, S. M.; Kisor, D. F.: *Ann. Pharmacother.* **27**, 151 (1993)
- 548 Watson, J. E.; Tagupa, E. T.: *Ann. Pharmacother.* **28**, 467 (1994)
- 549 Weise, M.: *Toxicchem. Krimtech.* **68**, 38 (2001)
- 550 Wells, T. G.; Young, R. A.; Kearns, G. L.: *Drug Saf.* **7**, 135 (1992)
- 551 Welty, T. E.; Copa, A. K.: *Ann. Pharmacother.* **28**, 1335 (1994)
- 552 von Werder, K.; Schulz, M.: *Prophylaxe und Therapie der Osteoporose*, p. 100, WVG, Stuttgart 1991
- 553 Wessel, T.; Unger, W.; Wilhelms, E.: *Krankenhauspharm.* **17**, 335 (1996)
- 554 White, M. C.; De Silva, P.; Havard, C. W. H.: *Neurology* **31**, 145 (1981)
- 555 White, R. H.; Zhou, H.; Romano, P.; Mungall, D.: *Clin. Pharmacol. Ther.* **58**, 588 (1995)
- 556 White, S.; Wong, H. Y.: *Clin. Chem.* **44**, 1110 (1998)
- 557 Wildsmith, J. A. W.; Tucker, G. T.; Cooper, S.; Scott, D. B.; Covino, B. G.: *Br. J. Anaesth.* **49**, 461 (1977)
- 558 Wilimzig, C.; Latz, R.; Vierling, W.; Mutschler, E.; Trnovec, T.; Nyulassy, S.: *Eur. J. Clin. Pharmacol.* **49**, 317 (1996)
- 559 Williams, N. E.; Calvey, T. N.; Chan, K.: *Br. J. Anaesth.* **55**, 27 (1983)
- 560 Willkens, R. F.: *Drugs* **40** (Suppl. 5), 34 (1990)
- 561 Wilson, A. P. R.: *Clin. Pharmacokinet.* **39**, 167 (2000)
- 562 Wilson, E. A.; Sills, G. J.; Forrest, G.; Brodie, M. J.: *Epilepsy Res.* **29**, 161 (1998)
- 563 Winek, C.; Wahba, W.; Jannssen, J.; Rozin, L.: *Forensic Sci. Int.* **78**, 165 (1996)
- 564 Winkler, M.; Christians, U.: *Drug Safety* **12**, 348 (1995)
- 565 Winchell, G. A.; King, J. D.; Chavez-Eng, C. M.; Constanzer, M. L.; Korn, S. H.: *J. Clin. Pharmacol.* **42**, 61 (2002)
- 566 Woosley, R. L.; Chen, Y.; Freiman, J. P.; Gillis, R. A.: *JAMA* **269**, 1532 (1993)
- 567 Wu, F.; Razzaghi, A.; Souney, P. F.: *Pharmacotherapy* **13**, 72 (1993)
- 568 Xu, Z.-X.; Naadimuthu, A.; Lockwood, G.; Berger, B.; Maier, G.; Dukivic, D.: *Pharm. Res.* **11** (Suppl.), S-334 (1994)
- 569 Yerasi, A. B.; Butts, J. D.; Butts, J. D.: *Am. J. Health-Syst. Pharm.* **54**, 85 (1997)
- 570 Yoshimoto, K.; Saima, S.; Echizen, H.; Nakamura, Y.; Kondo, T.; Yagishita, Y.; Ishizaki, T.: *Clin. Pharmacol. Ther.* **55**, 693 (1994)
- 571 Zaleon, C. R.; Guthrie, S. K.: *Am. J. Hosp. Pharm.* **51**, 2917 (1994)
- 572 Zeugin, T.; Zysset, T.; Cotting, J.: *Ther. Drug Monit.* **12**, 187 (1990)
- 573 Zettinig, G.; Watzinger, N.; Eber, B.; Henning, G.; Klein, W.: *Dtsch. Med. Wochenschr.* **122**, 1489 (1997)
- 574 Zhao, J. J.; Rogers, J. D.; Holland, S. D.; Larson, P.; Amin, R. D.; Haesen, R.; Freeman, A.; Seiberling, M.; Merz, M.; Cheng, H.: *Biopharm. Drug. Dispos.* **18**, 769 (1997)
- 575 Zhong, D.; Blume, H.: *Pharmazie* **49**, 736 (1994)
- 576 Zimmerman, J. J.; Kahan, B. D.: *J. Clin. Pharmacol.* **37**, 405 (1997)

Winek's Drug & Chemical Blood-Level Data 2001

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We have gathered the data in the table from the literature and from personal experience. The values are not considered absolute, but are to be used as a guide in evaluating a given case. The values can be affected by dose, route of administration, absorption differences, age and sex, tolerance, method of analysis, pathological or disease state, postmortem redistribution, etc. Users of the table are referred to *Winek's Toxicology Annual* and Chapter 72 in *Forensic Medicine*, Volume III, by Tedeschi, Eckert and Tedeschi for chapters discussing the data, reference to the data, and factors affecting blood-level values. For additional pharmacokinetic information and other tissue levels, users are referred to Baselt's reference, *Disposition of Toxic Drugs and Chemicals in Man*.

Users are cautioned against pharmacists using pharmacokinetics for interpretation of blood-level data when death is involved. It should be obvious that kinetics, even pharmacokinetics, are not applicable to the moribund state.

Definition of Blood Levels

Therapeutic Blood Level

Winek defines a therapeutic blood level as that concentration of drug and/or its active metabolite(s) present in the blood (serum or plasma) following therapeutically effective dosage in humans.

Toxic Blood Level

The concentration of drug and/or its active metabolite(s) or chemical present in the blood (serum or plasma) that is associated with serious toxic symptoms in humans.

Lethal Blood Level

The concentration of drug and/or its active metabolite(s) or chemical present in the blood (serum or plasma) that has been reported to cause death, or is so far above reported therapeutic or toxic concentrations, that one can judge that it might cause death in humans.

Normal Blood Level

Some of the values under normal represent normal body constituents and others represent values related to normal environmental exposure. Values can, and do, vary with geographical location.

Suggested additions or corrections can be made by contacting the author at drwinek@aol.com. Recommendations are always welcomed.

Units

Drugs and chemicals in the table are reported in both mg% and $\mu\text{g}/\text{mL}$. Drugs are listed by both their trade and generic names. Mg% (milligram percent) is equal to mg/dL (milligram/deciliter); $\mu\text{g}/\text{mL}$ (microgram/milliliter) is equal to mg/L (milligram/liter).

NOTE:

Divide the mg% level by 100 to obtain mg/mL. Divide the $\mu\text{g}/\text{mL}$ level by 100 to obtain $\mu\text{g}/\text{mL}$. To convert mg/L or $\mu\text{g}/\text{L}$ to mg% or $\mu\text{g}\%$, divide level by 10.

Examples:

1mg/L = 0.1mg%

3 $\mu\text{g}/\text{L}$ = 0.3 $\mu\text{g}\%$

μg is the representation for microgram (mcg).

Many therapeutic drugs are reported in nanograms/milliliter (ng/mL). To convert the listed mcg/mL in this table to ng/mL, multiply the listed value by 1000. For example, digoxin concentration of 0.0022 mcg/mL would be $0.0022 \times 1000 = 2.2$ ng/mL. Put simply, you move the decimal point three places to the right.



Dr. Charles L. Winek

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Dr. Winek has published 119 articles in scientific journals and authored, co-authored or contributed to 29 books.

Additionally, Dr. Winek is toxicology editor for the scientific journal *Forensic Science International* and a member of the editorial boards of *The Journal of Applied Toxicology* and the journal *Analytical Toxicology*.

(NOTE: *Winek's Drug & Chemical Blood-Level Data 2000* is reprinted with written permission as a courtesy to our customers. Fisher HealthCare accepts no responsibility for the accuracy of its contents.)

Drug and Chemical Blood Level Data - 2001

DRUG	Therapeutic or Normal		Toxic		Lethal	
	mg%	ug/ml	mg%	ug/ml	mg%	ug/ml
A						
Acebutolol (Spectral)	0.05 - 0.12	0.5 - 1.2	*****	*****	*****	*****
Acetaminophen (Tylenol)	1 - 2	10 - 20	15	150	>16	>160
Acetazolamide (Diamox)	1.0 - 1.5	10 - 15	*****	*****	*****	*****
Acetohexamide (Dymelor)	2.1 - 5.6	21 - 56	*****	*****	*****	*****
Acetone	*****	*****	20 - 30	200 - 300	55	550
Acetonitrile [met: to Cyanide]	*****	*****	*****	*****	0.077	0.77
Acetylsalicylic Acid [as met: Salicylate-for analgesic use]	2 - 10	20 - 100	15 - 30	150 - 300	50	500
Acetylsalicylic Acid [as met: Salicylate-for rheumatoid arthritis]	2 - 25	20 - 250	*****	*****	*****	*****
Actidil (Triprolidine)	0.0004 - 0.0044	0.004 - 0.044	*****	*****	*****	*****
Actifed (Pseudoephedrine)	0.050 - 0.077	0.50 - 0.77	*****	*****	1.9	19
(Triprolidine)	0.0004 - 0.0044	0.004 - 0.044	*****	*****	*****	*****
Actron (Ketoprofen)	0.5 - 0.15	5 - 1.5	*****	*****	*****	*****
Adalat (Nifedipine, Procardia)	0.0015 - 0.0162	0.015 - 0.162	*****	*****	*****	*****
Alcaine (Proparacaine)	*****	*****	*****	*****	1.5	15
Aldrin	0.00015	0.0015	0.00035	0.0035	*****	*****
Alfenta (Alfentanil)	0.010 - 0.12	0.10 - 1.2	*****	*****	*****	*****
Alfentanil (Alfenta)	0.010 - 0.12	0.10 - 1.2	*****	*****	*****	*****
Allegra (Fexofenadine)	0.018 - 0.021	0.18 - 0.210	*****	*****	*****	*****
Alphaprodine (Nisentil)	0.087 - 0.100	0.87 - 1.00	*****	*****	0.33	3.3
Alprazolam (Xanax)	0.0025 - 0.0102	0.025 - 0.102	*****	*****	0.0122 - 0.039	0.122 - 0.39
Aluminum	0.013	0.13	*****	*****	*****	*****
Amantadine (Symmetrel)	0.006 - 0.031	0.06 - 0.31	0.1 - 0.05	1 - 0.5	0.21 - 0.48	2.1 - 4.8
Ambien (Zolpidem)	0.0029 - 0.0272	0.029 - 0.272	*****	*****	0.05 - 0.112	0.5 - 1.12
Aminophylline (Theophylline)	1 - 2	10 - 20	3 - 4	30 - 40	5 - 25	50 - 250
Amitriptyline (Elavil)	0.012 - 0.025	0.12 - 0.25	>0.05	>0.5	0.2 - 2.0	2 - 20
Amitriptyline (Elavil)	0.012 - 0.025	0.12 - 0.25	>0.05	>0.5	*****	*****
[+met: Nortriptyline]						
Ammonia	0.05 - 0.17	0.5 - 1.7	*****	*****	*****	*****
Amobarbital (Amytal)	0.1 - 0.5	1 - 5	1 - 3	10 - 30	1.3 - 9.6	13 - 96
Amoxapine (Asendin)	0.0017 - 0.021	0.017 - 0.21	*****	*****	0.295 - 2.0	2.95 - 20
Amoxapine (Asendin)	0.02 - 0.04	0.2 - 0.4	*****	*****	*****	*****
[+met: 8-OH-amoxapine]						
Amphetamine	0.003 - 0.011	0.03 - 0.11	>0.05	>0.5	>0.1	>1
Amytal (Amobarbital)	0.1 - 0.5	1 - 5	1 - 3	10 - 30	1.3 - 9.6	13 - 96
Anafranil (Clomipramine)	0.01 - 0.045	0.1 - 0.45	*****	*****	*****	*****
Anaprox (Naproxen)	3.1 - 12	31 - 120	40	400	*****	*****
Analeridine (Leritine)	<0.05	<0.5	*****	*****	0.09 - 0.70	0.9 - 7.0
Aniline	*****	*****	*****	*****	0.63	6.3
Ansaid (Flubiprofen)	1 - 2.2	10 - 22	*****	*****	*****	*****
Antabuse (Disulfiram)	0.038 - 0.25	0.38 - 2.5	*****	*****	37 - 58	370 - 580
Antipyrine	0.5 - 2.5	5-25	*****	*****	11	110
Aralen (Chloroquine)	0.002 - 0.040	0.02 - 0.40	*****	*****	0.3 - 9.9	3 - 99
Arsenic	0.002 - 0.0062	0.02 - 0.062	0.1	1	0.9 - 1.5	9 - 15
Asendin (Amoxapine)	0.0017 - 0.021	0.017 - 0.21	*****	*****	0.295 - 2.0	2.95 - 20

Drug and Chemical Blood Level Data - 2001

DRUG	Therapeutic or Normal		Toxic		Lethal	
	mg%	ug/ml	mg%	ug/ml	mg%	ug/ml
Asendin (Amoxapine)	0.02 - 0.04	0.2 - 0.4	*****	*****	*****	*****
[+met: 8-OH-amoxapine]						
Astemizole (Hismanal)	0.00004	0.0004				
Atarax (Hydroxyzine, Vistaril)	0.0022 - 0.008	0.022 - 0.08	*****	*****	0.4 - 3.9	4.2 - 39
Atenolol (Tenorim)	0.02 - 0.07	0.20 - 0.70	3.5	35	*****	*****
Ativan (Lorazepam)	0.001 - 0.024	0.01 - 0.24	0.03 - 0.06	0.3 - 0.6	*****	*****
Atromid (Clofibrate)	12.2	122	*****	*****	*****	*****
Atropine	0.0035 - 0.0200	0.035 - 0.200	*****	*****	0.02	0.2
Avelox (Moxifloxacin)	0.45 - 1.44	4.5 - 14.4	*****	*****	*****	*****
Aventyl (Nortriptyline)	0.005 - 0.0375	0.05 - 0.375	0.05	0.5	1.3	13
[met: Amitriptyline (Elavil)]						
AZT (Retrovir, Zidovadine)	0.027 - 0.08	0.27 - 0.8	*****	*****	*****	*****
B						
Baclofen (Lioresal)	0.01 - 0.06	0.1 - 0.6	0.11 - 0.35	1.1 - 3.5	*****	*****
Barbital	1 - 2.6	10 - 26	6 - 8	60 - 80	>10	>100
Barbiturates (intermediate acting)	0.1 - 0.5	1 - 5	1 - 3	10 - 30	>3	>30
Barbiturates (long acting)	1 - 4	10 - 40	4 - 6	40 - 60	>8	>80
Barbiturates (short acting)	0.1	1	0.7	7	1	10
Benadryl (Diphenhydramine)	0.0025 - 0.0112	0.025 - 0.112	0.5	5	>0.8	>8
Benemid (Probenecid)	10 - 20	100 - 200	*****	*****	*****	*****
Bentyl (Dicyclomine)	0.002 - 0.008	0.02 - 0.08	*****	*****	*****	*****
Benzedrex (Propylhexedrine)	0.001	0.01	*****	*****	0.2 - 0.3	2 - 3
Benzene	*****	*****	>0	>0	0.090 - 0.12	0.90 - 1.2
Benzphetamine (Didrex)	0.0025 - 0.0500	0.025 - 0.500	>0.05	>0.5	1.4	14
Benztropine (Cogentin)	0.008 - 0.0126	0.08 - 0.126	0.0048	0.048	0.02 - 0.07	0.2 - 0.7
Bethanid (Bethanidine)	0.002 - 0.050	0.02 - 0.50	*****	*****	*****	*****
Bethanidine (Bethanid)	0.002 - 0.050	0.02 - 0.50	*****	*****	*****	*****
Bismuth	0.004 - 0.008	0.04 - 0.08				
Blocadren (Timolol)	0.004 - 0.023	0.04 - 0.23	*****	*****	*****	*****
Boron	0.08	0.8	4	40	5	50
Brethine (Terbutaline)	0.0002 - 0.0006	0.002 - 0.006	*****	*****	0.004	0.04
Brevibloc (Esmolol)	0.11 - 0.159	1.1 - 1.59	*****	*****	*****	*****
Bromide	0.30 - 23	3 - 230	50-150	500-1500	200	2000
Bromide [met: Carbromal (Carbital)]	0.6	6	40 - 125	400 - 1250	128.5 - 245.0	1285 - 2450
Bropheniramine (Dimetane)	0.0008 - 0.0015	0.008 - 0.015	*****	*****	*****	*****
Bupivacaine (Marcaine)	0.022 - 0.345	0.22 - 3.45	1	10	*****	*****
Buprenex (Buprenorphine)	0.0014 - 0.011	0.014 - 0.11	*****	*****	*****	*****
Buprenorphine (Buprenex)	0.0014 - 0.011	0.014 - 0.11	*****	*****	*****	*****
Bupropion (Wellbutrin)	0.0025 - 0.0100	0.025 - 0.100	*****	*****	0.73	7.3
Buspar (Buspirone)	0.0088 - 0.0147	0.088 - 0.147	*****	*****	*****	*****
Buspirone (Buspar)	0.0088 - 0.0147	0.088 - 0.147	*****	*****	0.73	7.3
Butabarbital (Butisol)	0.76 - 1.69	7.6 - 16.9	*****	*****	>3	>30
Butalbital (Sandoptal, Fioricet, Fiorinal)	0.17 - 0.26	1.7 - 2.6	0.7 - 4	7 - 40	1.3 - 2.6	13 - 26
Butanediol	*****	*****	*****	*****	28	280
Butaperazine (Repoise)	0.002 - 0.069	0.02 - 0.69	*****	*****	*****	*****
Butazolidin (Phenylbutazone)	1.6 - 15.0	16 - 150	20	200	40	400
Butisol (Butabarbital)	0.76 - 1.69	7.6 - 16.9	*****	*****	>3	>30

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	mg%	ug/ml	mg%	ug/ml	mg%	ug/ml
Butorphanol (Stadol)	0.00011-0.00017	0.0011 - 0.0017	*****	*****	*****	*****
Butyl Nitrite (Nitrite)	0.05 - 0.40	0.50 - 4	*****	*****	2.2	22
C						
Cadmium	0.00005-0.00040	0.0005 - 0.0040	0.005	0.05	0.11	1.1
Caffeine	0.2 - 1.0	2-10	*****	*****	>10	>100
Calan (Isoprotin, Verapamil)	0.0055 - 0.0355	0.055 - 0.355	0.09	0.9	0.09 - 8.5	0.9 - 85
Captopril (Capoten)	0.051 - 0.131	0.51 - 1.31	*****	*****	2 - 6	20 - 60
Capoten (Captopril)	0.051 - 0.131	0.51 - 1.31	*****	*****	2 - 6	20 - 60
Carbamazepine (Tegretol)	0.14 - 1.2	1.4 - 12	>1.5	>15	>5	>50
Carbital (Carbromal) [as met: Bromide]	0.6	6	40 - 125	400 - 1250	128.5 - 245.0	1285 - 2450
Carbocaine (Mepivacaine)	0.028 - 0.550	0.28 - 5.50	1	10	5	50
Carbon Monoxide	1 - 2%	*****	15 - 35%	*****	48-95%	*****
[% Hemoglobin as Carboxyhemoglobin]						
Carbon Tetrachloride	*****	*****	2 - 5	20 - 50	10 - 20	100 - 200
Carbromal (Carbital) [as met: Bromide]	0.6	6	40 - 125	400 - 1250	128.5 - 245.0	1285 - 2450
Cardene (Nicardipine)	0.0036 - 0.015	0.036 - 0.150	*****	*****	*****	*****
Cardizem (Diltiazem)	0.005 - 0.04	0.05 - 0.40	0.37 - 0.61	3.7 - 6.1	0.67	6.7
Carisoprodol (Soma)	1 - 4	10 - 40	3 - 5	30 - 50	11	110
Cataflam (Voltaren, Diclofenac)	0.075 - 0.20	0.75 - 2.0	0.6	6	*****	*****
Catapres (Clonidine)	0.00003-0.00015	0.0003-0.0015	0.0006	0.006	0.023	0.23
Celexa (Citalopram)	0.0081 - 0.016	0.081 - 0.16	*****	*****	0.024 - 0.13	0.24 - 1.3
Celontin (Methsuximide)	1.0 - 4	10 - 40	4.4	>44	*****	*****
[as met: Desmethylmethsuximide]						
Centrax (Prazepam)	0.001 - 0.004	0.01 - 0.04	*****	*****	*****	*****
China White (Methylfentanyl)	*****	*****	*****	*****	0.0002 - 0.0011	0.002 - 0.011
Chlor-Trimeton (Chlorpheniramine)	0.0017	0.017	2 - 3	20 - 30	*****	*****
Chloral Hydrate (Noctec)	0.2 - 1.2	2 - 12	10	100	25	250
[as met: Trichloroethanol]						
Chloramphenicol (Chloromycetin)	1 - 2	10 - 20	*****	*****	20	200
Chlorcyclizine	0.005 - 0.010	0.05 - 0.10				
Chlormepramine	*****	*****	*****	*****	0.015 - 0.055	0.15 - 0.55
(plus metabolite - Norchlormepramine)						
Chlordane	0.0001	0.001	0.00025	0.0025	0.17 - 0.49	1.7 - 4.9
Chlordiazepoxide (Librium)	0.067 - 0.31	0.67 - 3.1	0.5	5	2	20
Chlormezanone (Trancopal)	0.25 - 0.88	2.5 - 8.8	*****	*****	*****	*****
Chloromycetin (Chloramphenicol)	1 - 2	10 - 20	*****	*****	20	200
Chloroform	2 - 50	20 - 500	7 - 25	70 - 250	39	390
Chlorophen (Chlorphentermine)	0.032	0.32	*****	*****	*****	*****
Chloroprocaine (Nesacaine)	0.2 - 0.4	2 - 4	*****	*****	*****	*****
Chloroquine (Aralen)	0.002 - 0.040	0.02 - 0.40	*****	*****	0.3 - 9.9	3 - 99
Chlorothiazide	0.6	6	*****	*****	*****	*****
Chlorpheniramine (Chlor-Trimeton)	0.001 - 0.0017	0.01 - 0.017	*****	*****	0.05 - 0.11	0.5 - 1.1
Chlorphentermine (Chlorophen)	0.032	0.32	*****	*****	*****	*****
Chlorpromazine (Thorazine)	0.001 - 0.050	0.01 - 0.50	0.1 - 0.2	1 - 2	0.3 - 1.2	3 - 12
Chlorpropamide (Diabinese)	3.0 - 36.3	30 - 363	20 - 75	200 - 750	*****	*****
Chlorprothixene (Taractan)	0.004 - 0.030	0.04 - 0.30	0.04 - 0.08	0.4 - 0.8	*****	*****
Chlor-Trimeton (Chlorpheniramine)	0.001 - 0.0017	0.01 - 0.017	*****	*****	0.05 - 0.11	0.5 - 1.1

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DRUG	Therapeutic or Normal		Toxic		Lethal	
	mg%	ug/ml	mg%	ug/ml	mg%	ug/ml
Chlorthalidone (Combipress)	0.021 - 0.140	0.21 - 1.40	*****	*****	*****	*****
Cimetidine (Tagamet)	0.05 - 0.45	0.5 - 4.5	*****	*****	*****	*****
Citalopram (Celexa)	0.0081 - 0.016	0.081 - 0.16	*****	*****	0.024 - 0.13	0.24 - 1.3
Citanest (Prilocaine)	0.1 - 0.5	1 - 5	*****	*****	*****	*****
Claritin (Loratidine)	0.0007 - 0.0028	0.007 - 0.028	0.046	0.46	*****	*****
[metabolite: descarboethoxyloratadine]	0.0007 - 0.0028	0.007 - 0.028	0.046	0.46	*****	*****
Clinoril (Sulindac)	0.4 - 0.5	4 - 5	*****	*****	*****	*****
Clofibrate (Atromid)	12.2	122	*****	*****	*****	*****
Clomipramine (Anafranil)	0.01 - 0.045	0.1 - 0.45	*****	*****	*****	*****
Clonazepam (Klonopin)	0.0007 - 0.0075	0.007 - 0.075	*****	*****	*****	*****
Clonidine (Catepres)	0.00003-0.00015	0.0003-0.0015	0.0006	0.006	0.023	0.23
Clorazepate (Tranxene)	0.01 - 0.16	0.1 - 1.6	>0.5	>5.0	*****	*****
[as met: N-Desmethyldiazepam]						
Clozapine (Clozaril)	0.0102 - 0.0771	0.102 - 0.771	*****	*****	*****	*****
Clozaril (Clozapine)	0.0102 - 0.0771	0.102 - 0.771	*****	*****	*****	*****
Cocaine	0.005 - 0.093	0.05 - 0.930	0.09	0.9	0.1 - 2.0	1 - 20
Codeine	0.003 - 0.034	0.03 - 0.34	*****	*****	>0.16	>1.6
Cogentin (Benztropine)	0.008 - 0.0126	0.08 - 0.126	0.0048	0.048	0.02 - 0.07	0.2 - 0.7
Colbenemid (Colchicine)	0.00003-0.00300	0.0003-0.0300	*****	*****	0.0021 - 0.025	0.021 - 0.25
Colchicine (Colbenemid)	0.00003-0.00300	0.0003-0.0300	*****	*****	0.0021 - 0.025	0.021 - 0.25
Combipress (Chlorthalidone)	0.021 - 0.140	0.21 - 1.40	*****	*****	*****	*****
Compazine (Prochlorperazine)	*****	*****	>0.1	>1	0.5	5
Copper	0.10 - 0.15	1.0 - 1.5	0.54	5.4	0.25 - 6.30	2.5 - 63.0
Coumadin (Warfarin)	0.10 - 0.31	1.0 - 3.1	*****	*****	*****	*****
Cresol	*****	*****	*****	*****	0.90 - 1.90	9-19
Cyanide	0.0004 - 0.0041	0.004 - 0.041	*****	*****	0.11 - 5.3	1.1 - 53
Cylert (Pemoline)	0.07 - 0.62	0.70 - 6.2	*****	*****	*****	*****
Cyclizine	0.003 - 0.030	0.03 - 0.30	0.076	0.76	1.5	15
Cyclobenzaprine (Flexeril)	0.0015 - 0.0036	0.015 - 0.036	*****	*****	>0.04	>0.4
Cyclopropane	8 - 18	80 - 180	*****	*****	*****	*****
Cyclosporine (Sandimmune)	0.005 - 0.0045	0.05 - 0.045	*****	*****	*****	*****
D						
Dalmane (Flurazepam)	0.00005-0.00280	0.0005 - 0.0280	0.02	0.2	0.05 - 0.40	0.5 - 4.0
Dalmane (Flurazepam)	0.0033 - 0.0144	0.033 - 0.144	*****	*****	*****	*****
[+met: N-Desalkylflurazepam]						
Dantrium (Dantrolene)	0.1 - 0.3	1 - 3	*****	*****	*****	*****
Dantrolene (Dantrium)	0.1 - 0.3	1 - 3	*****	*****	*****	*****
Darvon (Propoxyphene)	0.023 - 0.107	0.23 - 1.07	0.03 - 0.06	0.3 - 0.6	0.1 - 1.7	1-17
Darvon (Propoxyphene)	0.104 - 0.371	1.04 - 3.71	0.28 - 1.2	2.8 - 12	0.27 - 4.7	2.7 - 47
[+ met: Norpropoxyphene]						
DDT	0.0013	0.013	*****	*****	*****	*****
Demerol (Meperidine)	0.007 - 0.080	0.07 - 0.80	0.5	5	0.8 - 2.0	8 - 20
Depakene (Valproic Acid)	5 - 10	50 - 100	0.71 - 20.0	7.1 - 200	*****	*****
Desipramine (Norpramin)	0.005 - 0.0684	0.05 - 0.684	>0.05	>0.5	1 - 2	10 - 20
[met: Imipramine (Tofranil)]						
Desmethylmethsuximide	1.6 - 4	16 - 40	4.4	>44	*****	*****
[met: Celontin (Methsuximide)]						

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	mg%	ug/ml	mg%	ug/ml	mg%	ug/ml
Desyrel (Trazodone)	0.07 - 0.489	0.7 - 4.89	*****	*****	1.5	15
Dextromethorphan	0.038	0.38	*****	*****	>0.3	>3
Diabinese (Chlorpropamide)	3.0 - 36.3	30 - 363	20 - 75	200 - 750	*****	*****
Diacetalol	0.063 - 0.433	0.63 - 4.33	*****	*****	*****	*****
Diamox (Acetazolamide)	1.0 - 1.5	10 - 15	*****	*****	*****	*****
Diazepam (Valium)	0.002 - 0.400	0.02 - 4.00	0.5 - 2.0	5 - 20	>3	>30
Diazepam (Valium)	0.031 - 0.600	0.31 - 6.00	*****	*****	>3.4	>34
[+ met: N-Desmethyldiazepam]						
Diazoxide (Hyperstat)	1.5 - 2.0	15 - 20	>10	>100	*****	*****
Diazinon	*****	*****	*****	*****	0.07 - 27.7	0.7 - 277
Dichloromethane (Methylene Chloride)	*****	*****	*****	*****	9.5 - 60	95 - 600
Diclofenac (Voltaren, Cataflam)	0.075 - 0.20	0.75 - 2.0	0.6	6	*****	*****
Dicumarol	0.8 - 5.9	8 - 59	7	70	*****	*****
Dicyclomine (Bentyl)	0.002 - 0.008	0.02 - 0.08	*****	*****	*****	*****
Didrex (Benzphetamine)	0.0025 - 0.0500	0.025 - 0.500	>0.05	>0.5	1.4	14
Dieldrin	0.00015 - 0.002	0.0015 - 0.02	0.015 - 0.0303	0.15 - 0.303	0.05 - 0.116	0.5 - 1.16
Diethylpropion (Tenuate)	0.0007 - 0.0200	0.007 - 0.200	*****	*****	0.54	5.4
Difenoxin (Motofen)	0.016	0.160	*****	*****	*****	*****
Diflucan (Fluconazol)	0.5 - 1.5	5 - 15	*****	*****	*****	*****
Diflunisal (Dolobid)	0.9 - 13	9 - 130	*****	*****	37 - 58	370 - 580
Digoxin	0.00007-0.0022	0.0007 - 0.022	0.00030-0.00040	0.0030 - 0.0040	0.0035 - 0.02	0.035 - 0.20
Dihydrocodeinone (Hydrocodone)	0.003 - 0.025	0.03 - 0.25	0.05 - 0.2	0.5 - 2	0.07 - 1.2	0.7 - 12
Dilantin (Phenytoin, Diphenylhydantoin)	1 - 2	10 - 20	2 - 5	20 - 50	>10	>100
Dilaudid (Hydromorphone)	0.0008 - 0.0049	0.008 - 0.049	****	*****	0.03	0.3
Diltiazem (Cardizem)	0.005 - 0.04	0.05 - 0.40	0.37 - 0.61	3.7 - 6.1	0.67	6.7
Dimetane (Brompheniramine)	0.0008 - 0.0015	0.008 - 0.015	*****	*****	*****	*****
Dimethylsulfoxide (DMSO)	5.04 - 338	50.4 - 3380	*****	*****	160 - 300	1600 - 3000
Dimethyltryptamine	0.0001 - 0.0100	0.001 - 0.100	*****	*****	*****	*****
Dinitro-O-Cresol	*****	*****	3 - 6	30 - 60	7.5	75
Diphenhydramine (Benadryl)	0.0025 - 0.0112	0.025 - 0.112	0.5	5	>0.8	>8
Diphenoxylate (Lomotil)	0.001 - 0.004	0.01 - 0.04	*****	*****	*****	*****
Diphenylhydantoin (Phenytoin, Dilantin)	1 - 2	10 - 20	2 - 5	20 - 50	>10	>100
Diprivan (Propofol)	0.2 - 1.6	2 - 16	*****	*****	*****	*****
Disopyramide (Norpace)	0.2 - 0.6	2 - 6	0.7	7	2.6	26
Disulfiram (Antabuse)	0.038 - 0.25	0.38 - 2.5	*****	*****	37 - 58	370 - 580
Divinyl Oxide	*****	*****	*****	*****	70	700
DMSO (Dimethylsulfoxide)	5.04 - 338	50.4 - 3380	*****	*****	160 - 300	1600 - 3000
Dolobid (Diflunisal)	0.9 - 13	9 - 130	*****	*****	37 - 58	370 - 580
Dolophine (Methadone)	0.0075 - 0.110	0.075 - 1.10	0.02 - 0.2	0.20 - 2.0	0.04 - 0.18	0.4 - 1.8
Dopram (Doxapram)	0.27 - 0.52	2.7 - 5.2	*****	0.04 - 0.8	*****	*****
Doral (Quazepam)	1.1 - 14.8	11 - 148	*****	*****	*****	*****
Doriden (Glutethimide)	0.2 - 1.2	2 - 12	1 - 8	10 - 80	3 - 10	30 - 100
Dothiepin (Prothiaden)	0.0017 - 0.0420	0.017 - 0.420	*****	*****	0.03 - 0.25	0.3 - 2.5
Doxapram (Dopram)	0.27 - 0.52	2.7 - 5.2	*****	*****	*****	*****
Doxepin (Sinequan)	0.010 - 0.025	0.10 - 0.25	0.012 - 0.43	0.12 - 4.3	0.2 - 2.6	2 - 26
Doxepin (Sinequan)	0.010 - 0.025	0.10 - 0.25	>0.05	>0.5	0.8 - 3.5	8 - 35
[+met: N-Desmethyldoxepin]						

Drug and Chemical Blood Level Data - 2001

DRUG	Therapeutic or Normal		Toxic		Lethal	
	mg%	ug/ml	mg%	ug/ml	mg%	ug/ml
Doxylamine (Unisom)	0.0069 - 0.0138	0.069 - 0.138	*****	*****	0.07 - 1.2	0.7 - 12
Duranest (Etidocaine)	0.05 - 0.15	0.5 - 1.5	*****	*****	*****	*****
Dymelor (Acetohexamide)	2.1 - 5.6	21 - 56	*****	*****	*****	*****
Dyphylline	0.65 - 1.43	6.5 - 14.3	3.6	36	*****	*****
E						
Effexor (Venlafaxine)	0.007 - 0.393	0.07 - 3.93	*****	*****	*****	*****
[met: O-Desmethylvenlafaxine]	0.0061 - 0.075	0.061 - 0.75	0.1 - 0.15	1 - 1.5	*****	*****
Elavil (Amitriptyline)	0.012 - 0.025	0.12 - 0.25	>0.05	>0.5	0.2 - 2.0	2 - 20
Elavil (Amitriptyline)	0.012 - 0.025	0.12 - 0.25	>0.05	>0.5	0.2 - 2.0	2 - 20
[+met: Nortriptyline]						
Eldepryl (Selegiline)	0.0009 - 0.0019	0.009 - 0.019	*****	*****	*****	*****
Emetine	0.005 - 0.0075	0.05 - 0.075	*****	*****	0.24	2.4
Enalapril (Vasotec)	0.0063 - 0.007	0.063 - 0.070	*****	*****	*****	*****
Encainide (Enkaid)	0.01 - 0.03	0.1 - 0.3	*****	*****	*****	*****
[as met: O-Demethylencaïnide]						
Encainide (Enkaid)	0.006 - 0.028	0.06 - 0.28	*****	*****	*****	*****
[as met: Methoxy-O-demethylencaïnide]						
Endrin	0.0003	0.003	0.0007 - 0.0032	0.007 - 0.032	0.045	0.45
Ephedrine	0.0068 - 0.01	0.068 - 0.10	*****	*****	0.35 - 2.1	3.5 - 21
Estazolam (Prosom)	0.0042 - 0.0100	0.042 - 0.100	0.125	1.25	*****	*****
Ethanol (listed toxic concentration is legal intoxication for driving in most states)	*****	*****	80 - 100	800 - 1000	>350	>3500
Ethchlorvynol (Placidyl)	0.05 - 0.88	0.5 - 8.8	*****	*****	2.2 - 21.3	22 - 213
Ethinamate (Valmid)	0.4 - 1.1	4 - 11	*****	*****	10 - 20	100 - 200
Ethosuximide (Zarontin)	4 - 10	40 - 100	*****	*****	25	250
Ethyl Chloride	20 - 30	200 - 300	*****	*****	40	400
Ethyl Ether	90 - 100	900 - 1000	*****	*****	140 - 189	1400 - 1890
Ethylene Glycol	*****	*****	150.0	1500.0	200 - 400	2000 - 4000
Etidocaine (Duranest)	0.05 - 0.15	0.5 - 1.5	*****	*****	*****	*****
Etodolac (Lodine)	1.2 - 4.7	12 - 47	*****	*****	*****	*****
F						
Famotidine (Pepcid)	0.0007 - 0.0035	0.007 - 0.035	*****	*****	*****	*****
Felbamate (Felbatol)	0.27 - 3.3	2.7 - 33	14 - 20	140 - 200	*****	*****
Felbatol (Felbamate)	0.27 - 3.3	2.7 - 33	14 - 20	140 - 200	*****	*****
Feldene (Piroxicam)	0.085 - 0.8	0.85 - 8.00	*****	*****	*****	*****
Felodipine (Plendil)	0.00015 - 0.00088	0.0015 - 0.0088	0.001 - 0.0015	0.01 - 0.015	*****	*****
Fenfluramine (Pondimin)	0.004 - 0.030	0.04 - 0.3	0.07 - 0.09	0.7 - 0.9	0.6 - 1.5	6 - 15
Fenoprofen (Nalfon)	2.7 - 6.6	27 - 6.6	*****	*****	71	710
Fentanyl (Sublimaze)	0.001 - 0.010	0.01 - 0.10	*****	*****	*****	*****
Fexofenadine (Allegra)	0.018 - 0.021	0.18 - 0.210	*****	*****	*****	*****
Fioricet (Butalbital)	0.17 - 0.26	1.7 - 2.6	0.7 - 4	7 - 40	1.3 - 2.6	13 - 26
Fiorinal (Butalbital)	0.17 - 0.26	1.7 - 2.6	0.7 - 4	7 - 40	1.3 - 2.6	13 - 26
Flecainide (Tambocar)	0.02 - 0.10	0.2 - 1.0	*****	*****	*****	*****
Flexeril (Cyclobenzaprine)	0.0015 - 0.0036	0.015 - 0.036	*****	*****	>0.04	>0.4
Flexin (Zoxazolamine)	0.3 - 1.3	3 - 13	*****	*****	*****	*****
Flubiprofen (Ansaid)	1 - 2.2	10 - 22	*****	*****	*****	*****
Fluconazol (Diflucan)	0.5 - 1.5	5 - 15	*****	*****	*****	*****

Drug and Chemical Blood Level Data - 2001

DRUG	Therapeutic or Normal		Toxic		Lethal	
	mg%	ug/ml	mg%	ug/ml	mg%	ug/ml
Flumazenil (Mazicon, Romazicon)	0.0006 - 0.0039	0.006 - 0.039	*****	*****	*****	*****
Flunitrazepam (Rohypnol)	0.006 - 0.0052	0.06 - 0.052	0.001 - 0.005	0.01 - 0.05	*****	*****
Fluoride	0.0014 - 0.04	0.014 - 0.4	*****	*****	1.5 - 20	15 - 200
Fluothane (Halothane)	2.2 - 26.0	22 - 260	*****	*****	20	200
Fluoxetine (Prozac)	0.009 - 0.040	0.09 - 0.40	*****	*****	0.13 - 0.68	1.3 - 6.8
Fluphenazine (Prolixin)	0.00009-0.00170	0.0009 - 0.0170	*****	*****	*****	*****
Flurazepam (Dalmane)	0.00005-0.00280	0.0005 - 0.0280	0.02	0.2	0.05 - 0.40	0.5 - 4.0
Flurazepam (Dalmane) [+met: N-Desalkylflurazepam]	0.0033 - 0.0144	0.033 - 0.144	*****	*****	*****	*****
Fluvoxamine (Luvox)	0.0031 - 0.0087	0.031 - 0.087	*****	*****	*****	*****
Forane (Isoflurane)	2.0 - 7.0	20.0 - 70.0	*****	*****	*****	*****
Furadantoin (Nitrofurantoin)	0.18	1.8	*****	*****	*****	*****
Fortavase, Invirase (Saquinavir)	0.011 - 0.11	0.11 - 1.1	*****	*****	*****	*****
Furosemide (Lasix)	0.1 - 1.0	1 - 10	>2	>20	*****	*****
G						
Gabapentin (Neurontin)	0.2 - 1.0	2 - 10	*****	*****	*****	*****
Gabitol (Tiagabine)	0.0001 - 0.0234	0.001 - 0.234	*****	*****	*****	*****
Gamma-Hydroxybutyrate (GHB)	<0.1	<1.0	2.6 - 36	26 - 360	>75	>750
GHB (Gamma-Hydroxybutyrate)	<0.1	<1.0	2.6 - 36	26 - 360	>75	>750
Glucophage (Metformin)	0.1 - 0.4	1 - 4	4.5 - 7.0	45 - 70	*****	*****
Glutethimide (Doriden)	0.2 - 1.2	2 - 12	1 - 8	10 - 80	3 - 10	30 - 100
Glycopyrrolate (Robinul)	0.005 - 0.0076	0.050 - 0.076	*****	*****	*****	*****
Gold (Sodium Aurothiomalate)	0.3 - 0.8	3 - 8	*****	*****	*****	*****
Guaifenesin (Robitussin)	0.04 - 0.14	0.4 - 1.4	21	210	*****	*****
Guanethidine (Ismelin)	0.001	0.01	*****	*****	*****	*****
H						
Habitrol (transdermal) (Nicotine)	0.0004 - 0.0444	0.004 - 0.444	*****	*****	0.14	1.4
Halcion (Triazolam)	0.002	0.02	*****	*****	*****	*****
Haldol (Haloperidol)	0.0006 - 0.0245	0.006 - 0.245	0.005 - 0.050	0.05 - 0.50	*****	*****
Haloperidol (Haldol)	0.0006 - 0.0245	0.006 - 0.245	0.005 - 0.050	0.05 - 0.50	*****	*****
Halothane (Fluothane)	2.2 - 26.0	22 - 260	*****	*****	20	200
Hexachlorophene (Phisohex)	0.0003 - 0.0650	0.003 - 0.650	*****	*****	0.22 - 3.5	2.2 - 35
Hismanol (Astemizole)	0.00004	0.0004	*****	*****	*****	*****
Hydralazine	0.02 - 0.09	0.2 - 0.9	*****	*****	*****	*****
Hydrochlorothiazide (Hydrodiuril)	0.007 - 0.038	0.07 - 0.38	*****	*****	*****	*****
Hydrocodone (Lortab, Vicodin)	0.003 - 0.025	0.03 - 0.25	0.05 - 0.2	0.5 - 2	0.07 - 1.2	0.7 - 12
Hydrodiuril (Hydrochlorothiazide)	0.007 - 0.038	0.07 - 0.38	*****	*****	*****	*****
Hydrogen Sulfide	*****	*****	*****	*****	0.092	0.92
Hydromorphone (Dilaudid)	0.0008 - 0.0049	0.008 - 0.049	****	*****	0.03	0.3
Hydroxychloroquine (Plaquenil)	0.0019 - 0.0210	0.019 - 0.210	*****	*****	6.1	61
Hydroxyzine (Atarax, Vistaril)	0.0022 - 0.008	0.022 - 0.08	*****	*****	0.4 - 3.9	4.2 - 39
Hyoscine (Scopolamine)	0.00003 - 0.0019	0.0003 - 0.019	*****	*****	0.189	1.89
Hyperstat (Diazoxide)	1.5 - 2.0	15 - 20	>10	>100	*****	*****
I						
Ibuprofen (Motrin)	1.7 - 4.9	17 - 49	8.4 - 70	84 - 700	*****	*****
Imitrex (Sumatriptan)	0.0024 - 0.0095	0.024 - 0.095	*****	*****	*****	*****
Imipramine (Tofranil)	0.015 - 0.0105	0.15 - 0.105	0.05 - 0.15	0.5 - 1.5	0.28 - 0.85	2.8 - 8.5

Drug and Chemical Blood Level Data - 2001

DRUG	Therapeutic or Normal		Toxic		Lethal	
	mg%	ug/ml	mg%	ug/ml	mg%	ug/ml
Imipramine (Tofranil)	0.015 - 0.025	0.15 - 0.25	*****	*****	*****	*****
[+met: Desipramine]						
Inderal (Propranolol)	0.001 - 0.034	0.01 - 0.34	0.2	2	0.8 - 1.2	8 - 12
Indocin (Indomethacin)	0.01 - 0.40	0.1 - 4	0.6	6	*****	*****
Indomethacin (Indocin)	0.01 - 0.40	0.1 - 4	0.6	6	*****	*****
INH (Isoniazid)	0.06 - 2.0	0.6 - 20	2 - 14.3	20 - 143	6.5 - 16.8	65 - 168
Invirase, Fortovase (Saquinavir)	0.011 - 0.11	0.11 - 1.1	*****	*****	*****	*****
Ionamin (Phentermine)	0.009 - 0.051	0.09 - 0.51	*****	*****	0.15 - 0.76	1.5 - 7.6
Iron	0.027 - 0.293	0.27 - 2.93	0.28 - 2.5	2.8 - 25	2 - 5	20 - 50
Ismelin (Guanethidine)	0.001	0.01	*****	*****	*****	*****
Isoflurane (Forane)	2.0 - 7.0	20.0 - 70.0	*****	*****	*****	*****
Isoniazid (INH)	0.06 - 2.0	0.6 - 20	2 - 14.3	20 - 143	6.5 - 16.8	65 - 168
Isopropanol	*****	*****	>40	>400	>150	>1500
Isoptin (Calan, Verapamil)	0.0055 - 0.0355	0.055 - 0.355	0.09	0.9	0.09 - 8.5	0.9 - 85
Isordil (Isosorbide Dinitrate)	0.0008 - 0.0038	0.008 - 0.038	*****	*****	*****	*****
Isosorbide Dinitrate (Isordil)	0.0008 - 0.0038	0.008 - 0.038	*****	*****	*****	*****
K						
Kemadrin (Procyclidine)	0.008 - 0.063	0.08 - 0.63	*****	*****	*****	*****
Ketamine	0.02 - 0.63	0.2 - 6.3	*****	*****	*****	*****
Ketoprofen (Orudis, Actron)	0.5 - 0.15	5 - 1.5	*****	*****	*****	*****
Ketorolac (Toradol)	0.087 - 0.45	0.87 - 4.5	*****	*****	*****	*****
Klonopin (Clonazepam)	0.0007 - 0.0075	0.007 - 0.075	*****	*****	*****	*****
Kwell (Lindane)	0.0001 - 0.0031	0.001 - 0.031	0.05	0.5	0.13	1.3
L						
Labetalol (Normodyne, Trandate)	0.0036 - 0.0271	0.036 - 0.271	*****	*****	*****	*****
Lamactal (<i>Lamotrigine</i>)	0.20 - 1.90	2 - 19	1.5 - 3.6	15 - 36	*****	*****
Lamotrigine (Lamactal)	0.20 - 1.90	2 - 19	1.5 - 3.6	15 - 36	*****	*****
Lasix (Furosemide)	0.1 - 1.0	1 - 10	>2	>20	*****	*****
Lead	0.04	0.4	0.04 - 1.37	0.4 - 13.7	0.11 - 0.53	1.1 - 5.3
Leritine (Anileridine)	<0.05	<0.5	*****	*****	0.09 - 0.70	0.9 - 7.0
Levo-Dromoran (Levorphanol)	0.0007 - 0.0021	0.007 - 0.021	*****	*****	0.08 - 0.27	0.8 - 2.7
Levoprome (Methotrimeprazine)	0.002 - 0.0271	0.02 - 0.271	*****	*****	*****	*****
Levorphanol (Levo-Dromoran)	0.0007 - 0.0021	0.007 - 0.021	*****	*****	0.08 - 0.27	0.8 - 2.7
Librium (Chlordiazepoxide)	0.067 - 0.31	0.67 - 3.1	0.5	5	2	20
Lidocaine (Xylocaine)	0.15 - 0.50	1.5 - 5.0	0.7 - 2	7 - 20	>2.5	>25
Lindane (Kwell)	0.0001 - 0.0031	0.001 - 0.031	0.05	0.5	0.13	1.3
Lioresal (Baclofen)	0.01 - 0.06	0.1 - 0.6	0.11 - 0.35	1.1 - 3.5	*****	*****
Lisinopril (Prinivil, Zestril)	0.002 - 0.0082	0.02 - 0.082	*****	*****	*****	*****
Lithium	0.42 - 0.97	4.2 - 9.7	1.39	13.9	>3.47	>34.7
Lodine (Etodolac)	1.2 - 4.7	12 - 47	*****	*****	*****	*****
Lomotil (Diphenoxylate)	0.001 - 0.004	0.01 - 0.04	*****	*****	*****	*****
Lopressor (Metoprolol)	0.003 - 0.027	0.03 - 0.27	*****	*****	0.47 - 14.2	4.7 - 142
Loratadine (Claritin)	0.0007 - 0.0028	0.007 - 0.028	0.046	0.46	*****	*****
metabolite: descarboethoxyloratadine)	0.0007 - 0.0028	0.007 - 0.028	0.046	0.46	*****	*****
Lorazepam (Ativan)	0.001 - 0.024	0.01 - 0.24	0.03 - 0.06	0.3 - 0.6	*****	*****
Lortab (Hydrocodone, Vicodin)	0.003 - 0.025	0.03 - 0.25	0.05 - 0.2	0.5 - 2	0.07 - 1.2	0.7 - 12
Loxapine (Loxitane)	0.001 - 0.003	0.01 - 0.03	*****	*****	0.19 - 0.77	1.9 - 7.7

Drug and Chemical Blood Level Data - 2001

DRUG	Therapeutic or Normal		Toxic		Lethal	
	mg%	ug/ml	mg%	ug/ml	mg%	ug/ml
Loxitan (Lorazepam)	0.001 - 0.003	0.01 - 0.03	*****	*****	0.19 - 0.77	1.9 - 7.7
LSD (Lysergic Acid Diethylamide, Lysergide)	*****	*****	0.0001 - 0.0009	0.001 - 0.009	*****	*****
Ludiomil (Maprotiline)	0.005 - 0.0718	0.05 - 0.718	0.024 - 0.080	0.24 - 0.80	0.2 - 1.3	2-13
Luvox (Fluvoxamine)	0.0031 - 0.0087	0.031 - 0.087				
Lysergic Acid Diethylamide (LSD, Lysergide)	*****	*****	0.0001 - 0.0009	0.001 - 0.009	*****	*****
Lysergide (LSD, Lysergic Acid Diethylamide)	*****	*****	0.0001 - 0.0009	0.001 - 0.009	*****	*****
M						
Magnesium	1.2 - 3.2	12 -32	8 - 12	80 -120	20 - 32	200 -320
Malathion	0.0 - 0.35	0.0 - 3.5	*****	*****	0.05 - 0.35	0.5 - 3.5
Manganese [serum values]	0.00002-0.00011	0.0002 - 0.0011	0.46	4.6	*****	*****
Maprotiline (Ludiomil)	0.005 - 0.0718	0.05 - 0.718	0.024 - 0.080	0.24 - 0.80	0.2 - 1.3	2-13
Marcaine (Bupivacaine)	0.022 - 0.345	0.22 - 3.45	1	10	*****	*****
Mazicon (Flumazenil, Romazicon)	0.0006 - 0.0039	0.006 - 0.039	*****	*****	*****	*****
MDA (3,4-Methylenedioxyamphetamine)	*****	*****	*****	*****	0.18 - 2.6	1.8 - 26
Mebaral (Mephobarbital)	0.05 - 0.35	0.5 - 3.5	*****	*****	*****	*****
Mefenamic Acid (Ponstel)	0.03 - 2.00	0.3 - 20.0	1.1 - 11.0	11 - 110	*****	*****
Mellaril (Thioridazine)	0.01 - 0.26	0.1 - 2.6	0.24 - 1.18	2.4 - 11.8	0.1 - 1.8	1 - 18
Mellaril (Thioridazine) [+met: Mesoridazine]	0.03 - 0.40	0.3 - 4.0	*****	*****	*****	*****
Meperidine (Demerol)	0.007 - 0.080	0.07 - 0.80	0.5	5	0.8 - 2.0	8 - 20
Mephenytoin (Mesantoin) [+met: N-Desmethyilmephenytoin]	2.5 - 4.0	25 - 40	5	50	*****	*****
Mephobarbital (Mebaral)	0.05 - 0.35	0.5 - 3.5	*****	*****	*****	*****
Mepivacaine (Carbocaine)	0.028 - 0.550	0.28 - 5.50	1	10	5	50
Meprobamate	0.2 - 2.6	2 - 26	6 - 10	60 -100	14 - 35	140 - 350
Mercury (Inorganic)	*****	*****	0.018 - 0.062	0.18 - 0.62	0.04 - 2.20	0.4 - 22.0
Mercury (Organic)	<0.008	<0.08	>0.02	>0.2	>0.06	>0.6
Mesantoin (Mephenytoin) [+met: N-Desmethyilmephenytoin]	2.5 - 4.0	25 - 40	5	50	*****	*****
Mesoridazine (Serentil)	0.118 - 0.352	1.18 - 3.52	*****	*****	0.3	3
Mestinon (Pyridostigmine)	40	400	*****	*****	*****	*****
Metaclopramide (Reglan)	0.0072 - 0.075	0.072 - 0.75	*****	*****	*****	*****
Metaxalone (Skelaxin)	29.6	296	*****	*****	*****	*****
Metformin (Glucophage)	0.1 - 0.4	1 - 4	4.5 - 7.0	45 - 70	*****	*****
Methadone (Dolophine)	0.0075 - 0.110	0.075 - 1.10	0.02 - 0.2	0.20 - 2.0	0.04 - 0.18	0.4 - 1.8
Methamphetamine	0.001 - 0.005	0.01 - 0.05	0.06 - 0.50	0.6 - 5.0	>1	>10
Methanol	*****	*****	20	200	>89	>890
Methaqualone (Quaalude)	0.04 - 0.80	0.4 - 8.0	1 - 3	10 - 30	>0.5	>5
Methazolamide (Neptazane)	4	40	*****	*****	*****	*****
Methocarbamol (Robaxin)	2.6 - 4.1	26 - 41	*****	*****	*****	*****
Methohexital	0.34 - 1.07	3.4 - 10.7	*****	*****	9.8	98
Methotrimeprazine (Levoprome)	0.002 - 0.0271	0.02 - 0.271	*****	*****	0.08 - 0.41	0.8 - 4.1
Methoxy-O-demethylencaïnide [met: Encainide]	0.006 - 0.028	0.06 - 0.28	*****	*****	*****	*****

Drug and Chemical Blood Level Data - 2001

DRUG	Therapeutic or Normal		Toxic		Lethal	
	mg%	ug/ml	mg%	ug/ml	mg%	ug/ml
Methsuximide (Celontin)	1.0 - 4	10 - 40	4.4	>44	*****	*****
[as met: Desmethylnmethsuximide]						
Methyldopa	0.10 - 0.75	1.0 - 7.5	1	10	*****	*****
Methylene Chloride (Dichloromethane)	*****	*****	*****	*****	9.5 - 60	95 - 600
3-4-Methylenedioxyamphetamines (MDA)	*****	*****	*****	*****	0.18 - 2.6	1.8 - 26
Methylfentanyl (China White)	*****	*****	*****	*****	0.0002 - 0.0011	0.002 - 0.011
Methylphenidate (Ritalin)	0.001 - 0.006	0.01 - 0.06	0.08	0.8	0.23	2.3
Methyprylon (Noludar)	0.5 - 1.5	5 - 15	3 - 6	30 - 60	10	100
Metoprolol (Lopressor)	0.003 - 0.027	0.03 - 0.27	*****	*****	0.47 - 14.2	4.7 - 142
Mexiletine (Mexitil)	0.05 - 0.20	0.5 - 2.0	*****	*****	2.1 - 4.5	21 - 45
Mexitil (Mexiletine)	0.05 - 0.20	0.5 - 2.0	*****	*****	2.1 - 4.5	21 - 45
Mianserin	0.001 - 0.016	0.01 - 0.16	0.011 - 0.050	0.11 - 0.50	0.01 - 0.26	0.1 - 2.6
Midazolam (Versed)	0.008 - 0.025	0.08 - 0.25	*****	*****	*****	*****
Milontin (Phensuximide)	0.4 - 1.4	4 - 14	8 - 15	80 - 150	*****	*****
Mirtazapine (Remeron)	0.0039 - 0.018	0.039 - 0.18	*****	*****	*****	*****
Moclobemide	0.3	3	*****	*****	5.6 - 9.0	56 - 90
Molybdenum	0.0015	0.015	*****	*****	*****	*****
Morphine	0.01	0.10	*****	*****	0.005 - 0.400	0.05 - 4.00
Motrin (Ibuprofen)	1.7 - 4.9	17 - 49	8.4 - 70	84 - 700	*****	*****
Motofen (Difenoxin)	0.016	0.160	*****	*****	*****	*****
Moxifloxacin (Avelox)	0.45 - 1.44	4.5 - 14.4	*****	*****	*****	*****
Mysoline (Primidone)	0.2 - 1.9	2 - 19	5 - 8	50 - 80	10	100
N						
N-Acetylprocainamide (NAPA)	0.2 - 1.2	2 - 12	1.6	16	*****	*****
[met: Procainamide (Pronestyl)]						
N-Desalkylflurazepam	0.001 - 0.014	0.01 - 0.14	*****	*****	*****	*****
[met: Flurazepam (Dalmane)]						
N-Desmethyldiazepam (Nordiazepam)	0.01 - 0.26	0.1 - 2.6	>0.5	>5	*****	*****
[met: Clorazepate (Tranxene)]						
N-Desmethyldiazepam (Nordiazepam)	0.002 - 0.180	0.02 - 1.80	*****	*****	*****	*****
[met: Diazepam (Valium)]						
Nalfon (Fenoprofen)	2.7 - 6.6	27 - 66	*****	*****	71	710
Naloxone (Narcan)	0.001	0.01	*****	*****	*****	*****
NAPA (N-Acetylprocainamide)	0.2 - 1.2	2 - 12	1.6	16	*****	*****
[met: Procainamide (Pronestyl)]						
Naprosyn (Naproxen)	3.1 - 12	31 - 120	40	400	*****	*****
Naproxen (Anaprox)	3.1 - 12	31 - 120	40	400	*****	*****
Narcan (Naloxone)	0.001	0.01	*****	*****	*****	*****
Nardil (Phenelzine)	0.0001 - 0.0002	0.001 - 0.002	*****	*****	>0.15	>1.5
Navane (Thiothixene)	0.001 - 0.010	0.01 - 0.10	*****	*****	*****	*****
Nebcin (Tobramycin)	0.16 - 0.78	1.6 - 7.8	*****	*****	*****	*****
Nefazodone (Serzone)	0.01 - 0.12	0.1 - 1.2	*****	*****	*****	*****
Nembutal (Pentobarbital)	0.1 - 0.3	1 - 3	>0.5	>5	1.0 - 16.9	10 - 169
Neo-Synephrine (Phenylephrine)	0.003	0.03	*****	*****	*****	*****
Neptazane (Methazolamide)	4	40	*****	*****	*****	*****
Nesacaine (Chloroprocaine)	0.2 - 0.4	2 - 4	*****	*****	*****	*****
Neurontin (Gabapentin)	0.2 - 1.0	2 - 10	*****	*****	*****	*****

Drug and Chemical Blood Level Data - 2001

DRUG	Therapeutic or Normal		Toxic		Lethal	
	mg%	ug/ml	mg%	ug/ml	mg%	ug/ml
Nicardipine (Cardene)	0.0036 - 0.015	0.036 - 0.150	*****	*****	*****	*****
Nickel	0.011	0.11	*****	*****	*****	*****
Nicotine	0.0004 - 0.0444	0.004 - 0.444	*****	*****	0.14	1.4
Nicotine (Transdermal)	0.0004 - 0.0031	0.004 - 0.031	*****	*****	*****	*****
(Prostep, Habitrol, Nicotrol)						
Nicotrol (Transdermal, Nicotine)	0.0004 - 0.0031	0.004 - 0.031	*****	*****	*****	*****
Nifedipine (Adalat, Procardia)	0.0015 - 0.0162	0.015 - 0.162	*****	*****	*****	*****
Nisentil (Alphaprodine)	0.087 - 0.100	0.87 - 1.00	*****	*****	*****	*****
Nitrite (Butyl Nitrite)	0.05 - 0.40	0.5 - 4	*****	*****	2.2	22
Nitro-Bid (Nitro-Dur, Nitroglycerin)	0.0002 - 0.0013	0.002 - 0.013	*****	*****	*****	*****
Nitro-Dur (Nitro-Bid, Nitroglycerin)	0.0002 - 0.0013	0.002 - 0.013	*****	*****	*****	*****
Nitrofurantoin (Furadantoin)	0.18	1.8	*****	*****	*****	*****
Nitroglycerin (Nitro-Bid, Nitro-Dur)	0.0002 - 0.0013	0.002 - 0.013	*****	*****	*****	*****
Nitroprusside [as met: Thiocyanate]	0.55 - 2.9	5.5 - 29	>10	>100	20	200
Nitrous Oxide	29 - 44	290 - 440	*****	*****	35	350
Noctec (Chloral Hydrate)	0.2 - 1.2	2 - 12	10	100	25	250
[as met: Trichloroethanol]						
Noludar (Methyprylon)	0.5 - 1.5	5 - 15	3 - 6	30 - 60	10	100
Nordiazepam (N-Desmethyldiazepam)	0.01 - 0.26	0.1 - 2.6	>0.5	>5.0	*****	*****
[met: Clorazepate (Tranxene)]						
Nordiazepam (N-Desmethyldiazepam)	0.002 - 0.180	0.02 - 1.80	*****	*****	*****	*****
[met: Diazepam (Valium)]						
Norflex (Orphenadrine)	0.003 - 0.085	0.03 - 0.85	0.2	2	0.4 - 0.8	4.0 - 8.0
Norfluoxetine [met: Fluoxetine (Prozac)]	0.0018 - 0.0466	0.018 - 0.466	*****	*****	0.09 - 0.5	0.9 - 5.0
Normodyne (Labetalol, Trandate)	0.0036 - 0.0271	0.036 - 0.271	*****	*****	*****	*****
Norpace (Disopyramide)	0.2 - 0.6	2 - 6	0.7	7	2.6	26
Norpramin (Desipramine)	0.005 - 0.0684	0.05 - 0.684	>0.05	>0.5	1 - 2	10 - 20
[met: Imipramine (Tofranil)]						
Nortriptyline (Aventyl)	0.005 - 0.0375	0.05 - 0.375	0.05	0.5	1.3	13
[met: Amitriptyline (Elavil)]						
Norverapamil	0.0160 - 0.0207	0.160 - 0.207	*****	*****	*****	*****
[met: Verapamil (Calan, Isoptin)]	0.4 - 0.8	4 - 8	1	10	>2	>20
Norvir (Ritonavir)	1.1 - 6.6	11.2 - 66.0	*****	*****	*****	*****
Novocaine (Procaine)	0.02 - 1.30	0.2 - 13.0	>2.1	>21	*****	*****
0						
O-Demethylencaïnide [met: Encainide]	0.01 - 0.03	0.1 - 0.3	*****	*****	*****	*****
Olanzapine (Zyprexa)	0.0009 - 0.0023	0.009 - 0.023	*****	*****	0.12	1.2
Ondansetron (Zofran)	0.0022 - 0.0114	0.022 - 0.114	*****	*****	*****	*****
Orinase (Tolbutamide)	4.3 - 9.6	43 - 96	*****	*****	64	640
Orphenadrine (Norflex)	0.003 - 0.085	0.03 - 0.85	0.2	2	0.4 - 0.8	4.0 - 8.0
Orudis (Ketoprofen)	0.5 - 0.15	5 - 1.5	*****	*****	*****	*****
Oxalate	0.2	2	*****	*****	1 - 11	10 - 110
Oxaprozin (Daypro)	0.01 - 0.04	0.1 - 0.4				
Oxazepam (Serax)	0.015 - 0.140	0.15 - 1.4	>0.2	>2	*****	*****
Oxycodone (Percodan, Oxycontin)	0.001 - 0.010	0.01 - 0.10	0.02 - 0.50	0.2 - 5.0	*****	*****
Oxycontin (Oxycodone, Percodan)	0.001 - 0.010	0.01 - 0.10	0.02 - 0.50	0.2 - 5.0	*****	*****
Oxyphenbutazone (Tandearil)	1.1 - 11.8	11 - 118	*****	*****	*****	*****

Drug and Chemical Blood Level Data - 2001

DRUG	Therapeutic or Normal		Toxic		Lethal	
	mg%	ug/ml	mg%	ug/ml	mg%	ug/ml
P						
Pancuronium (Pavulon)	0.009 - 0.022	0.09 - 0.22	*****	*****	0.16	1.6
Papaverine	0.025 - 0.400	0.25 - 4.00	*****	*****	*****	*****
Paradione (Paramethadione)	0.11 - 0.50	1.1 - 5.0	*****	*****	*****	*****
Paraldehyde	2.0 - 33.2	20 - 332	20 - 40	200 - 400	>50	>500
Paramethadione (Paradione)	0.11 - 0.50	1.1 - 5.0	*****	*****	*****	*****
Para-Methoxyamphetamine (PMA)	*****	*****	*****	*****	0.02 - 0.49	0.2 - 4.9
Paraquat	*****	*****	0.06 - 0.32	0.6 - 3.2	>1.5	>15
Parathion	*****	*****	*****	*****	0.05 - 3.40	0.5 - 34.0
Parnate (Tranlycypromine)	0.005	0.05	*****	*****	*****	*****
Paroxetine (Paxil)	0.0031 - 0.0062	0.031 - 0.062	*****	*****	0.14 - 0.34	1.4 - 3.4
Pavulon (Pancuronium)	0.009 - 0.022	0.09 - 0.22	*****	*****	0.16	1.6
Paxil (Paroxetine)	0.0031 - 0.0062	0.031 - 0.062	*****	*****	0.14 - 0.34	1.4 - 3.3
PCP (Phencyclidine)	*****	*****	0.0007 - 0.0240	0.007 - 0.240	0.1 - 0.5	1 - 5
Pemoline (Cylert)	0.07 - 0.62	0.70 - 6.2	*****	*****	*****	*****
Pentachlorophenol	*****	*****	*****	*****	>4.6	>46
Pentazocine (Talwin)	0.003 - 0.100	0.03 - 1.00	0.2 - 0.5	2 - 5	>0.03	>0.3
Pentobarbital (Nembutal)	0.1 - 0.3	1 - 3	>0.5	>5	1.0 - 16.9	10 - 169
Pentothal (Thiopental)	0.1 - 4.2	1 - 42	>0.7	>7	1 - 40	10 - 400
Pentoxifylline (Trental)	0.006 - 0.16	0.06 - 1.6	*****	*****	>0.6	>6.0
Pepcid (Famotidine)	0.0007 - 0.0035	0.007 - 0.035	*****	*****	*****	*****
Percodan (Oxycodone)	0.001 - 0.010	0.01 - 0.10	0.02 - 0.50	0.2 - 5.0	*****	*****
Perphenazine (Trilafon)	0.00004-0.00300	0.0004 - 0.0300	0.1	1	*****	*****
Phenacetin	0.01 - 2.00	0.1 - 20.0	>3	>30	*****	*****
Phencyclidine (PCP)	*****	*****	0.0007 - 0.0240	0.007 - 0.240	0.1 - 0.5	1 - 5
Phendimetrazine	0.002 - 0.024	0.02 - 0.24	*****	*****	*****	*****
Phenelzine (Nardil)	0.0001 - 0.0002	0.001 - 0.002	*****	*****	>0.15	>1.5
Phenergan (Promethazine)	0.0006 - 0.0099	0.006 - 0.099	*****	*****	0.24 - 1.2	2.4 - 12
Phenmetrazine	0.004 - 0.024	0.04 - 0.24	*****	*****	0.4	4
Phenobarbital	1 - 4	10 - 40	4 - 6	40 - 60	>8	>80
Phenol	*****	*****	*****	*****	>4.6	>46
Phensuximide (Milontin)	0.4 - 1.4	4 - 14	8 - 15	80 - 150	*****	*****
Phentermine (Ionamin)	0.009 - 0.051	0.09 - 0.51	*****	*****	0.15 - 0.76	1.5 - 7.6
Phenylbutazone (Butazolidin)	1.6 - 15.0	16 - 150	20	200	40	400
Phenylephrine (Neo-Synephrine)	0.003	0.03	*****	*****	*****	*****
Phenylpropranolamine	0.003 - 0.048	0.03 - 0.48	*****	*****	>1	>10
Phenytoin (Dilantin, Diphenylhydantoin)	1 - 2	10 - 20	2 - 5	20 - 50	>10	>100
Phisohex (Hexachlorophene)	0.0003 - 0.0650	0.003 - 0.650	*****	*****	0.22 - 3.5	2.2 - 35
Phosphorus (Adult)	2.0 - 4.8	20 - 48	*****	*****	*****	*****
Phosphorus (Child)	4 - 7	40 - 70	*****	*****	*****	*****
Piroxicam (Feldene)	0.085 - 0.8	0.85 - 8.00	*****	*****	*****	*****
Placidyl (Ethchlorvynol)	0.05 - 0.88	0.5 - 8.8	*****	*****	2.2 - 21.3	22 - 213
Plaquenil (Hydroxychloroquine)	0.0019 - 0.0210	0.019 - 0.210	*****	*****	6.1	61
Plendil (Felodipine)	0.00015-0.00088	0.0015 - 0.0088	0.001 - 0.0015	0.01 - 0.015	*****	*****
PMA (Para-Methoxyamphetamine)	*****	*****	*****	*****	0.02 - 0.49	0.2 - 4.9
Polythiazide (Renese)	0.2 - 0.7	2 - 7	*****	*****	*****	*****
Pondimin (Fenfluramine)	0.004 - 0.030	0.04 - 0.3	0.07 - 0.09	0.7 - 0.9	0.6 - 1.5	6 - 15

Drug and Chemical Blood Level Data - 2001

DRUG	Therapeutic or Normal		Toxic		Lethal	
	mg%	ug/ml	mg%	ug/ml	mg%	ug/ml
Ponstel (Mefenamic Acid)	0.03 - 2.00	0.3 - 20.0	1.1 - 11.0	11 - 110	*****	*****
Prazepam (Centrax)	0.001 - 0.004	0.01 - 0.04	*****	*****	*****	*****
Preludin (Phenmetrazine)	0.004 - 0.024	0.04 - 0.24	*****	*****	0.4	4
Prilocaine (Citanest)	0.1 - 0.5	1 - 5	*****	*****	*****	*****
Primidone (Mysoline)	0.2 - 1.9	2 - 19	5 - 8	50 - 80	10	100
Prinivil (Lisinopril, Zestril)	0.002 - 0.0082	0.02 - 0.082				
Probenecid (Benemid)	10 - 20	100 - 200	*****	*****	*****	*****
Procainamide (Pronestyl)	0.4 - 0.8	4 - 8	1	10	>2	>20
Procaine (Novocaine)	0.02 - 1.30	0.2 - 13.0	>2.1	>21	*****	*****
Procardia (Adalat, Nifedipine)	0.0015 - 0.0162	0.015 - 0.162	*****	*****	*****	*****
Prochlorperazine (Compazine)	*****	*****	>0.1	>1	0.5	5
Procyclidine (Kemadrin)	0.008 - 0.063	0.08 - 0.63	*****	*****	*****	*****
Prolixin (Fluphenazine)	0.00009-0.00170	0.0009 - 0.0170	*****	*****	*****	*****
Prograf (Tacrolimus)	0.0005 - 0.002	0.005 - 0.02	>0.003	>0.03	*****	*****
Promazine (Sparine)	*****	*****	>0.1	>1	>0.5	>5
Promethazine (Phenergan)	0.0006 - 0.0099	0.006 - 0.099	*****	*****	0.24 - 1.2	2.4 - 12
Pronestyl (Procainamide)	0.4 - 0.8	4 - 8	1	10	>2	>20
Propafenone (Rythmol)	0.0176 - 0.165	0.17 - 1.65	*****	*****	*****	*****
Proparacaine (Alcaine)	0.2 - 1.6	2 - 16	*****	*****	*****	*****
Propofal (Diprivan)	0.023 - 0.107	0.23 - 1.07	0.03 - 0.06	0.3 - 0.6	0.1 - 1.7	1-17
Propoxyphene (Darvon)	0.023 - 0.107	0.23 - 1.07	0.03 - 0.06	0.3 - 0.6	0.1 - 1.7	1-17
Propoxyphene (Darvon)	0.104 - 0.371	1.04 - 3.71	0.28 - 1.2	2.8 - 12	0.27 - 4.7	2.7 - 47
[+met: Norpropoxyphene						
Propranolol (Inderal)	0.6 - 71.1	6 - 711	*****	*****	*****	*****
Propylene Glycol	0.01 - 0.034	0.1 - 0.34	0.2	2	0.8 - 1.2	8 - 12
Propylhexedrine (Benzedrex)	0.001	0.01	*****	*****	0.2 - 0.3	2 - 3
Prosom (Estazolam)	0.0042 - 0.0100	0.042 - 0.100	0.125	1.25	*****	*****
Prostep (transdermal) (Nicotine)	0.0004 - 0.0031	0.004 - 0.031	*****	*****	*****	*****
Prothiaden (Dothiepin)	0.0017 - 0.0420	0.017 - 0.420	*****	*****	0.03 - 0.25	0.3 - 2.5
Protriptyline (Vivactil)	0.007 - 0.038	0.07 - 0.38	0.05 - 0.20	0.5 - 2.0	>0.1	>1
Prozac (Fluoxetine)	0.009 - 0.040	0.09 - 0.40	*****	*****	0.13 - 0.68	1.3 - 6.8
Pseudoephedrine (Sudafed)	0.050 - 0.077	0.50 - 0.77	*****	*****	1.9	19
Pyribenzamine (Tripeleminamine)	0.006	0.06	*****	*****	1	10
Pyridostigmine (Mestinon)	40	400	*****	*****	*****	*****
Q						
Quaalude (Methaqualone)	0.04 - 0.80	0.4 - 8.0	1 - 3	10 - 30	>0.5	>5
Quazepam	1.1 - 14.8	11 - 148	*****	*****	*****	*****
Quetiapine (Serogrel)	0.0195 - 0.0632	0.195 - 0.632	1.3	13	*****	*****
Quinidine	0.10 - 0.60	1 - 6	1	10	3 - 5	30 - 50
Quinine	0.17 - 0.97	1.7 - 9.7	>1	>10	1.2	12
R						
Rantidine (Zantac)	0.0036 - 0.0094	0.036 - 0.094	*****	*****	*****	*****
Reglan (Metaclopramide)	0.0072 - 0.075	0.072 - 0.75	*****	*****	*****	*****
Remeron (Mirtazapine)	0.0039 - 0.018	0.039 - 0.18	*****	*****	*****	*****
Remifentanil (Ultiva)	0.0003 - 0.005	0.003 - 0.05	*****	*****	*****	*****
Renese (Polythiazide)	0.2 - 0.7	2 - 7	*****	*****	*****	*****
Repoise (Butaperazine)	0.002 - 0.069	0.02 - 0.69	*****	*****	*****	*****

Drug and Chemical Blood Level Data - 2001

DRUG	Therapeutic or Normal		Toxic		Lethal	
	mg%	ug/ml	mg%	ug/ml	mg%	ug/ml
Restoril (Temazepam)	0.04 - 0.09	0.4 - 0.9	*****	*****	*****	*****
Retrovir (AZT, Zidovadine)	0.027 - 0.08	0.27 - 0.8	*****	*****	*****	*****
Rezulin (Troglitazone)	0.1 - 0.3	1 - 3	*****	*****	*****	*****
Risperdal (Risperidone)	0.0003 - 0.0012	0.003 - 0.012	*****	*****	*****	*****
Risperidone (Risperdal)	0.0003 - 0.0012	0.003 - 0.012	*****	*****	*****	*****
9-Hydroxy Risperidone	0.099	0.990	*****	*****	*****	*****
Ritalin (Methylphenidate)	0.001 - 0.006	0.01 - 0.06	0.08	0.8	0.23	2.3
Ritonavir (Norvir)	1.1 - 6.6	11.2 - 66.0	*****	*****	*****	*****
Robaxin (Methocarbamol)	2.6 - 4.1	26 - 41	*****	*****	*****	*****
Robinul (Glycopyrrolate)	0.005 - 0.0076	0.050 - 0.076	*****	*****	*****	*****
Robitussin (Guaifenesin)	0.04 - 0.14	0.4 - 1.4	21	210	*****	*****
Rofecoxib (Vioxx)	0.016 - 0.032	0.16 - 0.32	*****	*****	*****	*****
Rohypnol (Flunitrazepam)	0.006 - 0.0052	0.06 - 0.052	0.001 - 0.005	0.01 - 0.05	*****	*****
Romazicon (Flumazenil, Mazicon)	0.0006 - 0.0039	0.006 - 0.039	*****	*****	*****	*****
Rythmol (Propafenone)	0.0176 - 0.165	0.17 - 1.65	*****	*****	*****	*****
S						
Salicylamide	0.5	5.0	*****	*****	4	40
Salicylate	2 - 10	20 - 100	15 - 30	150 - 300	50	500
[met: Acetylsalicylic Acid - for normal usage]						
Salicylate	2 - 25	20 - 250	*****	*****	*****	*****
[met: Acetylsalicylic Acid-for rheumatoid arthritis]						
Sandimmune (Cyclosporine)	0.005 - 0.045	0.050 - 0.045	*****	*****	*****	*****
Sandoptal (Butalbital)	0.17 - 0.26	1.7 - 2.6	0.7 - 4	7 - 40	1.3 - 2.6	13 - 26
Saquinavir (Invirase, Fortovase)	0.011 - 0.11	0.11 - 1.1	*****	*****	*****	*****
Scopolamine (Hyoscine)	0.00003 - 0.0019	0.0003 - 0.019	*****	*****	0.189	1.89
Secobarbital (Seconal)	0.1 - 0.22	1 - 2.2	>0.3	>3	0.5 - 5.2	5 - 52
Seconal(Secobarbital)	0.1 - 0.22	1 - 2.2	>0.3	>3	0.5 - 5.2	5 - 52
Sectral (Acebutolol)	0.05 - 0.12	0.5 - 1.2	*****	*****	*****	*****
Seldane (Terfenadine) [as active metabolite]	0.0133 - 0.0423	0.133 - 0.423	*****	*****	*****	*****
Selegine (Eldepryl)	0.0009 - 0.0019	0.009 - 0.019	*****	*****	*****	*****
Serax (Oxazepam)	0.015 - 0.140	0.15 - 1.40	>0.2	>2	*****	*****
Serentil (Mesoridazine)	0.118 - 0.352	1.18 - 3.52	*****	*****	0.3	3
Seroflurane (Serofrane)	1.34	13.4	*****	*****	*****	*****
Serofrane (Seroflurane)	1.34	13.4	*****	*****	*****	*****
Serognel (Quetiapine)	0.0195 - 0.0632	0.195 - 0.632	1.3	13	*****	*****
Sertraline (Zoloft)	0.0055 - 0.025	0.055 - 0.25	*****	*****	*****	*****
Serzone (Nefazodone)	0.01 - 0.12	0.1 - 1.2	*****	*****	*****	*****
Sildenafil (Viagra)	0.0127 - 0.115	0.127 - 1.15	*****	*****	*****	*****
Simvastatin (Zocor)	0.00027-0.00056	0.0027 - 0.0056	*****	*****	*****	*****
Sinequan (Doxepin)	0.010 - 0.025	0.10 - 0.25	0.012 - 0.43	0.12 - 4.3	0.2 - 2.6	2 -26
Sinequan (Doxepin)	0.010 - 0.025	0.10 - 0.25	>0.05	>0.5	0.8 - 3.5	8 - 35
[+met: N-Desmethyldoxepin]						
Skelaxin (Metaxalone)	29.6	296	*****	*****	*****	*****
Sodium Aurothiomalate (Gold)	0.3 - 0.8	3 - 8	*****	*****	*****	*****
Soma (Carisoprodol)	1 - 4	10 - 40	3 - 5	30 - 50	11	110
Sparine (Promazine)	*****	*****	>0.1	>1	>0.5	>5
Stadol (Butorphanol)	0.00011-0.00017	0.0011 - 0.0017	*****	*****	*****	*****

Drug and Chemical Blood Level Data - 2001

DRUG	Therapeutic or Normal		Toxic		Lethal	
	mg%	ug/ml	mg%	ug/ml	mg%	ug/ml
Stelazine (Trifluoperazine)	0.05 - 0.20	0.5 - 2.0	0.12 - 0.30	1.2 - 3.0	0.3 - 0.8	3 - 8
Strychnine	*****	*****	0.2	2	0.28 - 1.20	2.8 - 12.0
Sublimaze (Fentanyl)	0.001 - 0.010	0.01 - 0.10	*****	*****	*****	*****
Sudafed (Pseudoephedrine)	0.050 - 0.077	0.50 - 0.77	*****	*****	1.9	19
Sufenta (Sufentanil)	0.0001 - 0.0011	0.001 - 0.011	*****	*****	*****	*****
Sufentanil (Sufenta)	0.0001 - 0.0011	0.001 - 0.011	*****	*****	*****	*****
Sulfadiazine	8 - 15	80 - 150	*****	*****	*****	*****
Sulfaguanidine	3 - 5	30 - 50	*****	*****	*****	*****
Sulfanilamide	10 - 15	100 - 150	*****	*****	*****	*****
Sulfisoxazole	9 - 10	90 - 100	*****	*****	*****	*****
Sulindac (Clinoril)	0.4 - 0.5	4 - 5	*****	*****	*****	*****
Sumatriptan (Imitrex)	0.0024 - 0.0095	0.024 - 0.095	*****	*****	*****	*****
Surmontil (Trimipramine)	0.001 - 0.030	0.01 - 0.30	*****	*****	0.87 - 1.20	8.7 - 12.0
Symmetrel (Amantadine)	0.006 - 0.031	0.06 - 0.31	0.1 - 0.05	1 - 0.5	0.21 - 0.48	2.1 - 4.8
T						
Tacrolimus (Prograf)	0.0005 - 0.002	0.005 - 0.02	>0.003	>0.03	*****	*****
Tagamet (Cimetidine)	0.05 - 0.45	0.5 - 4.5	*****	*****	*****	*****
Talwin (Pentazocine)	0.003 - 0.100	0.03 - 1.00	0.2 - 0.5	2 - 5	>0.03	>0.3
Tambocar (Flecainide)	0.02 - 0.10	0.2 - 1.0	*****	*****	*****	*****
Tandearil (Oxyphenbutazone)	1.1 - 11.8	11 - 118	*****	*****	*****	*****
Taractan (Chlorprothixene)	0.004 - 0.030	0.04 - 0.30	0.04 - 0.08	0.4 - 0.8	*****	*****
Tegretol (Carbamazepine)	0.14 - 1.2	1.4 - 12	>1.5	>15	>5	>50
Temazepam (Restoril)	0.04 - 0.09	0.4 - 0.9	*****	*****	*****	*****
Tenormin (Atenolol)	0.02 - 0.07	0.20 - 0.70	3.5	35	*****	*****
Tenuate (Diethylpropion)	0.0007 - 0.0200	0.007 - 0.200	*****	*****	0.54	5.4
Terbutaline (Brethine)	0.0002 - 0.0006	0.002 - 0.006	*****	*****	0.004	0.04
Terfenadine (Seldane) [as active metabolite]	0.0133 - 0.0423	0.133 - 0.423	*****	*****	*****	*****
Tetrachloroethylene	*****	*****	*****	*****	0.45 - 4.0	4.5 - 44.0
Tetrahydrocannabinol (THC)	<0.019	<0.19	*****	*****	*****	*****
Thallium	<0.008	<0.08	>0.1	>1	0.05 - 1.10	0.5 - 11.0
THC (Tetrahydrocannabinol)	<0.019	<0.19	*****	*****	*****	*****
Theophylline (Aminophylline)	1 - 2	10 - 20	3 - 4	30 - 40	5 - 25	50 - 250
Thiocyanate	0.6 - 2.9	6 - 29	*****	*****	*****	*****
Thiocyanate [met: Nitroprusside]	0.55 - 2.9	5.5 - 29	>10	>100	20	200
Thiopental (Pentothal)	0.1 - 4.2	1 - 42	>0.7	>7	1 - 40	10 - 400
Thioridazine (Mellaril)	0.01 - 0.26	0.1 - 2.6	>0.5	>5	0.1 - 1.8	1 - 18
Thioridazine (Mellaril)	0.03 - 0.40	0.3 - 4.0	*****	*****	*****	*****
[+met: Mesoridazine]						
Thiothixene (Navane)	0.001 - 0.010	0.01 - 0.10	*****	*****	*****	*****
Thorazine (Chlorpromazine)	0.001 - 0.050	0.01 - 0.50	0.1 - 0.2	1 - 2	0.3 - 1.2	3 - 12
Tiagabine (Gabitol)	0.0001 - 0.0234	0.001 - 0.234	*****	*****	*****	*****
Tigan (Trimethobenzamide)	0.1 - 0.2	1 - 2	*****	*****	*****	*****
Timolol (Blocadren)	0.004 - 0.023	0.04 - 0.23	*****	*****	*****	*****
Tin	0.012 - 0.014	0.12 - 0.14	*****	*****	*****	*****
Tobramycin (Nebcin)	0.16 - 0.78	1.6 - 7.8	*****	*****	*****	*****
Tocainide (Tonocard)	0.4 - 1.0	4 - 10	*****	*****	*****	*****
Tofranil (Imipramine)	0.015 - 0.0105	0.15 - 0.105	0.05 - 0.15	0.5 - 1.5	0.28 - 0.85	2.8 - 8.5

Drug and Chemical Blood Level Data - 2001

DRUG	Therapeutic or Normal		Toxic		Lethal	
	mg%	ug/ml	mg%	ug/ml	mg%	ug/ml
Tofranil (Imipramine) [+met: Desipramine]	0.015 - 0.025	0.15 - 0.25	*****	*****	*****	*****
Tolbutamide (Orinase)	4.3 - 9.6	43 - 96	*****	*****	64	640
Tolectin (Tolmetin)	3.7	37	>6	>60	*****	*****
Tolmetin (Tolectin)	3.7	37	>6	>60	*****	*****
Toluene	*****	*****	*****	*****	1	10
Tonocard (Tocainide)	0.4 - 1.0	4 - 10	*****	*****	*****	*****
Toradol (Ketorolac)	0.087 - 0.45	0.87 - 4.5	*****	*****	*****	*****
Tramadol (Ultram)	0.01 - 0.06	0.1 - 0.6				
Trancopal (Chlormezanone)	0.25 - 0.88	2.5 - 8.8	*****	*****	*****	*****
Trandate (Labetalol, Normodyne)	0.0036 - 0.0271	0.036 - 0.271	*****	*****	*****	*****
Tranxene (Chlorazepate)	0.01 - 0.16	0.1 - 1.6	>0.5	>5.0	*****	*****
[as met: N-Desmethyldiazepam]						
Tranlycypromine (Parnate)	0.005	0.05	*****	*****	*****	*****
Trazodone (Desyrel)	0.07 - 0.489	0.7 - 4.89	*****	*****	1.5	15
Trental (Pentoxifylline)	0.006 - 0.16	0.06 - 1.6	*****	*****	>0.6	>6.0
Triazolam (Halcion)	0.002	0.02	*****	*****	*****	*****
Tribromoethanol	*****	*****	*****	*****	9	90
Trichloroethane	*****	*****	*****	*****	10 - 100	100 - 1000
Trichloroethanol	0.2 - 1.2	2 - 12	10	100	25	250
[met: Chloral Hydrate (Noctec)]						
Trichloroethylene	0.1 - 9.0	1 - 90	*****	*****	0.3 - 11.0	3 - 110
Tridione (Trimethadione)	1 - 3	10 - 30	*****	*****	*****	*****
Trifluoperazine (Stelazine)	0.05 - 0.20	0.5 - 2.0	0.12 - 0.30	1.2 - 3.0	0.3 - 0.8	3 - 8
Trilafon (Perphenazine)	0.00004-0.00300	0.0004 - 0.0300	0.1	1	*****	*****
Trimethadione (Tridione)	1 - 3	10 - 30	*****	*****	*****	*****
Trimethobenzamide (Tigan)	0.1 - 0.2	1 - 2	*****	*****	*****	*****
Trimethoprim (Trimpex)	0.1 - 0.2	1 - 2	*****	*****	*****	*****
Trimipramine (Surmontil)	0.001 - 0.030	0.01 - 0.30	*****	*****	0.87 - 1.20	8.7 - 12.0
Trimpex (Trimethoprim)	0.1 - 0.2	1 - 2	*****	*****	*****	*****
Tripelennamine (Pyribenzamine)	0.006	0.06	*****	*****	1	10
Tripolidine (Actidil)	0.0004 - 0.0044	0.004 - 0.044	*****	*****	*****	*****
Tubocurarine	0.004 - 0.600	0.04 - 6.00	*****	*****	*****	*****
Tylenol (Acetaminophen)	1 - 2	10 - 20	15	150	>16	>160
U						
Ultiva (Remifentanil)	0.0003 - 0.005	0.003 - 0.05	*****	*****	*****	*****
Ultram (Tramadol)	0.01 - 0.06	0.1 - 0.6				
Unisom (Doxylamine)	0.0069 - 0.0138	0.069 - 0.138	*****	*****	0.07 - 1.2	0.7 - 12
Uric Acid	3 - 7	30 - 70	*****	*****	*****	*****
V						
Valium (Diazepam)	0.002 - 0.400	0.02 - 4.00	0.5 - 2.0	5 - 20	>3	>30
Valium (Diazepam)	0.031 - 0.600	0.31 - 6.00	*****	*****	>3.4	>34
[+met: N-Desmethyldiazepam]						
Valmid (Ethinamate)	0.4 - 1.1	4 - 11	*****	*****	10 - 20	100 - 200
Valproic Acid (Depakene)	5 - 10	50 - 100	0.71 - 20.0	7.1 - 200	*****	*****
Vancomycin	3 - 4	30 - 40	*****	*****	*****	*****
Vasotec (Enalapril)	0.00063 - 0.007	0.0063 - 0.070	*****	*****	*****	*****
Venlafaxine (Effexor)	0.007 - 0.393	0.07 - 3.93	*****	*****	*****	*****

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DRUG	Therapeutic or Normal		Toxic		Lethal	
	mg%	ug/ml	mg%	ug/ml	mg%	ug/ml
[met: O-Desmethylvenlafaxine]	0.0061 - 0.075	0.061 - 0.75	0.1 - 0.15	1 - 1.5	*****	*****
Verapamil (Calan, Isoptin)	0.0055 - 0.0355	0.055 - 0.355	0.09	0.9	0.09 - 8.5	0.9 - 85
Versed (Midazolam)	0.008 - 0.025	0.08 - 0.25	*****	*****	*****	*****
Viagra (Sildenafil)	0.0127 - 0.115	0.127 - 1.15				
Vicodin (Hydrocodone, Lortab)	0.003 - 0.025	0.03 - 0.25	0.05 - 0.2	0.5 - 2	0.07 - 1.2	0.7 - 12
Vioxx (Rofecoxib)	0.016 - 0.032	0.16 - 0.32	*****	*****	*****	*****
Vivactil (Protriptyline)	0.007 - 0.038	0.07 - 0.38	0.05 - 0.20	0.5 - 2.0	>0.1	>1
Vistaril (Atarax, Hydroxyzine,)	0.0022 - 0.008	0.022 - 0.08	*****	*****	0.4 - 3.9	4.2 - 39
Vistazine (Hydroxyzine)	0.008	0.08	1.3	13	3.9	39
Voltaren (Diclofenac, Cataflam)	0.075 - 0.20	0.75 - 2.0	0.6	6	*****	*****
W						
Warfarin (Coumadin)	0.10 - 0.31	1.0 - 3.1	*****	*****	*****	*****
Wellbutrin (Bupropion)	0.0025 - 0.0100	0.025 - 0.100	*****	*****	0.73	7.3
X						
Xanax (Alprazolam)	0.0025 - 0.0102	0.025 - 0.102	*****	*****	0.0122 - 0.039	0.122 - 0.390
Xylene	*****	*****	*****	*****	0.3 - 11.0	3 - 110
Xylocaine (Lidocaine)	0.15 - 0.50	1.5 - 5.0	0.7 - 2	7 - 20	>2.5	>25
Y						
Yocon (Yohimbine)	0.0046 - 0.029	0.046 - 0.290	*****	*****	*****	*****
Yohimbine (Yocon)	0.0046 - 0.029	0.046 - 0.290	*****	*****	*****	*****
Z						
Zantac (Rantidine)	0.0036 - 0.0094	0.036 - 0.094	*****	*****	*****	*****
Zarontin (Ethosuximide)	4 - 10	40 - 100	*****	*****	25	250
Zestril (Lisinopril, Prinivil)	0.002 - 0.0082	0.02 - 0.082				
Zidovadine (AZT, Retrovir)	0.027 - 0.08	0.27 - 0.8	*****	*****	*****	*****
Zilenton (Zyflo)	0.04 - 0.31	0.4 - 3.1	*****	*****	*****	*****
Zinc	0.068 - 0.136	0.68 - 1.36	*****	*****	*****	*****
Zocor (Simvastatin)	0.00027-0.00056	0.0027 - 0.0056	*****	*****	*****	*****
Zofran (Ondansetron)	0.0022 - 0.0114	0.022 - 0.114	*****	*****	*****	*****
Zolmitriptan (Zomig)	0.0029 - 0.0272	0.029 - 0.272	*****	*****	0.05 - 0.112	0.5 - 1.12
Zoloft (Sertraline)	0.0055 - 0.025	0.055 - 0.25	*****	*****	*****	*****
Zolpidem (Ambien)	0.0003 - 0.0018	0.003 - 0.018	*****	*****	*****	*****
Zomig (Zolmitriptan)	0.0029 - 0.0272	0.029 - 0.272	*****	*****	0.05 - 0.112	0.5 - 1.12
Zoxazolamine (Flexin)	0.3 - 1.3	3 - 13	*****	*****	*****	*****
Zyflo (Zilenton)	0.04 - 0.31	0.4 - 3.1	*****	*****	*****	*****
Zyprexa (Olanzapine)	0.0009 - 0.0023	0.009 - 0.023	*****	*****	0.12	1.2