

## Tobramycin



|                                       |   |
|---------------------------------------|---|
| <b>Alternate Name:</b>                | Nebcin  |
| <b>Performing Lab:</b>                | New Hanover   |
| <b>Specimen Container:</b>            | Red top tube  |
| <b>Minimum Volume Required:</b>       | 1.0 mL  |
| <b>Testing Availability</b>           | <b>Routine:</b> 24 hours/day<br><b>Stat:</b> Yes  |
| <b>Turnaround Time:</b>               | Routine: 4 hours<br>Stat: < 1 hour  |
| <b>Special Handling:</b>              | Peak: Collect 30 minutes after infusion<br>Of dose<br><br>Trough: Collect immediately before<br>Infusion of dose  |
| <b>Patient Preparation:</b>           | None  |
| <b>Specimen Stability:</b>            |   |
| <b>Reference Range:</b>               | Trough: 0.0 – 2.0 mg/L<br>Peak: 4.0 – 10.0 mg/L   |
| <b>Critical Value:</b>                | Trough: > 3.0 mg/L<br>Peak: > 12.0 mg/L   |
| <b>CPT Code:</b>                      | 80200   |
| <b>HED Test Group:</b>                | Test Group – LAB at NH site   |
| <b>HED Test Name:</b>                 | Test Group – CLAB at CF site<br>Test Name – Tobramycin (select<br>peak, random, or trough level)  |
| <b>Testing Methodology:</b>           | Turbidimetric - Rate  |
| <b>Causes for Specimen Rejection:</b> | Improper labeling   |
| <b>Other Comments:</b>                |   |
| <b>Clinical Significance:</b>         | Tobramycin is administered to treat serious infections caused by aerobic gram-negative bacilli (eg, a number of the Enterobacteriaceae, P aeruginosa). These include lower respiratory tract, intra-abdominal, soft tissue, bone or joint, wound, and |

complicated urinary tract infections;  
bacteremias; and meningitis.