## Montgomery County Coroner's Office / Miami Valley Regional Crime Laboratory - Toxicology

### Confirmation and Quantitation of Cannabinoids by LC/MS/MS

July 2020

### Summary of Validation

The toxicology laboratory validated a LC/MS/MS method for confirming and quantitating 4 cannabinoids in blood, serum, and urine. This method uses a solid phase extraction method and the analytes are analyzed using a LCMSMS instrument in MRM mode. All calibrators, controls and interference studies were prepared from NIST-Traceable reference standards with certificates of analysis. The drugs included are D9-Tetrahydrocannabinol (THC), 11-Nordelta9-THC-carboxylic acid (THC-COOH), cannabidiol (CBD), and 11-Hydroxy-D9-THC (11OH).

The method was validated using blood calibrators and controls. Analytes are qualitative in postmortem urine and quantitative in blood, serum, and OVI urine. The analytical work was done by Treena Wiebe, Kialee Bowles, Elizabeth Kiely, Quinton Carter, and Brian Simons and reviewed by Matthew Juhascik and Heather Antonides.

This validation started on July 7, 2020 and ended on July 23, 2020. LCMSMS1, 2, and 3 were used during the method validation and all data was combined.

The method was determined to be acceptable for the qualitative and quantitative determination of THC, THC-COOH, 11-OH, and CBD.

The validated parameters are shown below:

Parameter	Acceptance Criteria	Results
Bias –	Maximum of +/- 20%	Between day biases were less than
		14%. Several low controls were not
		accurate for 11-OH or THC-
		COOH; LOQ will be calibrator 2
		for those two compounds (4
		ng/mL).
Carryover –	A negative specimen following the	No carryover was seen in negative
	highest calibrator is a true negative	specimens following the highest
		calibrator or in a specimen
		following a case with a large
		amount of drug present. Injection
		loop wash method was added to the
		acquisition method.
<b>Interference</b> – for all analytes.	No interfering signal from matrix or	Delta8-THC in high concentration
	drugs used in assay	is distinguishable from delta9-THC.
		In lower concentrations, delta8-
		THC will appear as a shoulder to
		the right of delta9-THC. In the
		chance that the integration cannot
		account for this, quantitation is
		reported as THC only for this

		mathed Otherwise no interfering
		method. Otherwise, no interfering signals were seen in the matrices or
		with related and unrelated drugs
Limit of Detection – for all	At least 1 mg/ml for THC THC	commonly seen in this laboratory.
	At least 1 ng/mL for THC, THC-	All curves are set to a quadratic
analytes	COOH, 11-OH, and CBD	regression. The LOD will be set as
		the lowest acceptable calibrator
Date of the second	TI 0/ CC : 4 C : 4: C	which is 1 ng/mL.  The % coefficient of variation for
Precision	The % coefficient of variation for	
	controls (within and between runs)	all controls (between runs and
	not to exceed 15% within run) was less than 15% for	
		THC-COOH, CBD, and THC. The
	within run % coefficient of	
		variation for the low control on one
		day for 11-OH reached 20%.
		LOD for 11-OH will be 1ng/mL but
		the LOQ will be 4ng/mL.
Stability on the autosampler	Samples analyzed against a curve	Samples were stable on the
	from day 0 should calculate within	autosampler (< 20% quantitative
	20%.	change) for 4 days after the initial
		extraction.
Recovery –	Greater than 80%	Recoveries were calculated for all
		analytes. None of the analytes had
		a recovery greater than 80%. The
		deuterated internal standards for
		each analyte had the same recovery,
		therefore, making the recovery
N	D	acceptable.
Matrix Effect –	Between 80 – 120 %	Matrix effects for blood varied
		from 30%-97%; however, the
		internal standard chosen for a drug
		behaved in a similar manner as the
		drug.
		Matrix effects for urine varied from
		43% -114%; however, the internal
		standard chosen for a drug behaved
		in a similar manner as the drug.
		in a similar manner as the drug.
		Serum Accuracy – A PT serum
		sample was run with acceptable
		results. Serum controls must be run
		with serum samples. A serum
		calibration would only have to be
		done if serum controls fail.
Uncertainty of Measurement –	To be calculated	The UOM for each of the drugs was
		determined by using the toxicology
		laboratories standard uncertainty
		budget. The UOM's are listed
		below:
		THC – 15%
		THC-COOH – 17%
		CBD – 15%
		11-OH – 11%
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Dilution Accuracy -	Within 20% of target	Dilutions were within 12% of target concentrations; therefore, dilutions may be performed for this assay. Any dilution must be made up with matching blank matrix volume.
Previous Casework –	Cases will be analyzed using the new method and quantitations evaluated against previous results.	Thirty-Eight cases were analyzed with the new LCMSMS method and compared against the GCMS method. 37 results agreed within +/-20%. 1 result fell outside of the +/-20% range (33%). In all, the results were considered acceptable and the discrepancies toxicologically insignificant.

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### Addition of delta 8 THC and THCCOOH to THC by LC/MS/MS

## Summary of Validation

The toxicology laboratory validated the addition of delta 8 THC and THCCOOH to our currently validated THC method by LC-MS/MS. All calibrators, available controls and interference studies were prepared from NIST-Traceable reference standards with certificates of analysis.

The analytical work was done by Philip Carter, Kialee Bowles, and Brian Simons and reviewed by Matthew Juhascik.

This validation was begun and completed in May of 2022. LCMSMS instrument #2 was used during the method validation.

The method was determined to be acceptable for the qualitative confirmation of delta 8 THC and delta 8 THCCOOH. Currently, this analysis will only be done using LCMSMS 2. Additional instruments will be validated as necessary.

The method is fit for its intended purpose.

The validated parameters are shown below:

Parameter	Acceptance Criteria	Results
Interferences	No interfering signal from matrix or drugs used in assay	No interfering signals were seen in the matrices or with related and unrelated drugs commonly seen in this laboratory. The internal standard does not interfere with the analytes and the analytes do not interfere with any of the internal standards.
Carryover	A negative specimen following the highest calibrator is a true negative	No carryover was seen in negative specimens following the highest calibrator
Limit of Detection	At least 1 ng/mL	Both analytes can be detected at 1 ng/mL.
Recovery	N/A	Recoveries varied from ~26% to ~109%. Target analyte had similar recovery to its specific internal standard which was determined to be acceptable.
Ion Suppression / Enhancement	75% - 125%, CV < 20%	Suppression/enhancement ranged from 86% - 180%. Some CVs were over 20%. Target analytes agreed with their internal standard. Delta 8 THC in urine did not agree;

	however, delta 8 THC will not be
	seen in urine.
Previous casework	Casework previously suspected of
	being positive for delta 8
	THC/THCCOOH was confirmed as
	positive by this method.