Rx Test

Specimen No: SVRXSAMP-002
Physician: Ima Test

DOB: 01/01/2000
Sex: FEMALE

Sample Collection: Jan. 01, 2021 08:00 EST
Sample Analysis: Jan. 04, 2021 08:00 EST

FOR PATIENTS, CONSULT YOUR HEALTHCARE PROVIDER PRIOR TO ANY MEDICATION OR DOSE CHANGES.

MEDICATION	DOSAGE FREQUENCY	RESULT	DDI*	INDICATION
IN THE MEDICAL RECORD:				
AMLODIPINE Norvasc	10 mg DAILY	+		Cardiovascular agents / Calcium channel blocking agents
BREXPIPRAZOLE REXULTI	3 mg DAILY	−	▲	Psychotherapeutic agents / Antipsychotics
NOT IN THE MEDICAL RECORD:				
BUPRENORPHINE Subutex	Not in medical record	+	▲	Central nervous system agents / Analgesics
DICLOFENAC Voltaren	Not in medical record	+		Central nervous system agents / Analgesics
LORAZEPAM Ativan	Not in medical record	+	▲	Central nervous system agents / Anxiolytics, sedatives, and hypnotics
NALOXONE Narcan	Not in medical record	+		Central nervous system agents / Other CNS drugs

Result:
+ Above minimum reference value
− Below minimum reference value*

*Drug-Drug Interaction (DDI): See details on the following pages.
Major - The use of these medications together is contraindicated. Rare exceptions may exist.
▲ Moderate - The use of these medications together may be contraindicated in a select group of patients. The patient should be monitored for possible manifestations of the interaction.

A medication may be below our reference value in the sample due to various reasons including time between last dose and sample collection, non-adherence, taking only as needed, and/or rapid metabolism.

MEDICATIONS NOT IN ASSAY:

LEVOTHYROXINE (75 MCG)

Medical record transcription accuracy is the responsibility of the ordering physician

This PrecisMed® test was developed and its performance characteristics determined by Phenomics Health Inc. It has not been cleared or approved by the FDA. The laboratory is regulated under CLIA as qualified to perform high-complexity testing. This test is used for clinical purposes, though results should not be intended for use as a sole means for a clinical diagnosis or patient management decisions. It should not be regarded as investigational or for research. Phenomics Health Inc. tests are not chiral specific and will not distinguish between enantiomeric forms of certain drugs. Use professional judgement when interpreting the results of the detected medications with consideration for the patient's known medications.

CLIA # 23D2194915

Phenomics Health Inc.
46701 Commerce Center Drive
Plymouth, MI 48170
(734) 233-3070
support@phenomicshealth.com

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Certified: N/A
Laboratory Director: Dr. Manoj Tyagi, Ph.D.

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Interaction Details

BREXPIPRAZOLE / BUPRENORPHINE: **MODERATE**

Evidence Level Established

Description

Brexpiprazole may increase the central nervous system depressant (CNS depressant) activities of Buprenorphine. Buprenorphine is a central nervous system depressant. Administering other drugs within the central nervous system (CNS) depressant class of drugs may potentiate these effects. Significant respiratory depression and death have been reported in association with buprenorphine, especially when taken by the intravenous (IV) route in combination with other CNS depressants.

Management

According to the FDA label, consider reduced doses of other CNS depressants, and avoid such drugs in patients at high risk of buprenorphine overuse/self-injection. Initiate buprenorphine patches (Butrans brand) at 5 mcg/hr when used with other CNS depressants. Monitor closely for signs of CNS depression.

References

LORAZEPAM / BUPRENORPHINE: **MODERATE**

Evidence Level Established

Description

Lorazepam may increase the central nervous system depressant (CNS depressant) activities of Buprenorphine. Buprenorphine is a central nervous system depressant. Administering other drugs within the central nervous system (CNS) depressant class of drugs may potentiate these effects. Significant respiratory depression and death have been reported in association with buprenorphine, especially when taken by the intravenous (IV) route in combination with other CNS depressants.

Management

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References