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Quantities and Units in Drugs of Abuse

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Introduction

In Clinical Laboratory Sciences essential features are the exacting nature of the work performed and the demand for a precise presentation of the outcome. In drugs of abuse the parent compound is usually named in a report although the metabolites are often the components determined by the laboratory. Further the domain is highly international or 'global'. The adherent informatics system therefore needs to identify the findings accurately and to present them with the degree of detail required. At the same time it has to facilitate the transfer over linguistic and cultural barriers without distortion or loss of granularity, that is to promote clear, unambiguous, meaningful and fully informative communication in different terminologies. The degree to which a message (such as a laboratory report) needs to be expressed in a formal, systematic language depends on the geographical, linguistic, social or professional distance between the communicating parties. The greater the distance, the greater the risk of misunderstanding. Within one laboratory, local jargon terms may be used which are usually well understood between colleagues, but which would not be sufficiently widely known for communication with the outside world. Likewise, a laboratory and its local community of users, such as hospital or community pysicians, may use a 'local dialect' of the language of laboratory medicine which is well understood by all concerned; but when the communication possibilities are wider, even transnational, risks of serious misunderstanding arise.

Scope

The purpose is to apply the IFCC-IUPAC recommended syntax structures for request and report and to create a standard systematic terminology which can be used as the basis for coding laboratory messages in the domain of drugs of abuse. This is to facilitate communication of messages about such quantities in publications and through computing and telecommunication between databases, messages that contain sufficient information to allow translation from and to the required 'local dialect' at each end.

The standard systematic names recommended are for transmission and are not intended for standardization of the language used by clinicians or laboratory practitioners.