Salicylate	
Description	Non-opioid analgesic and anti-inflammatory
Indication	Suspected toxicity
Additional Info	Metabolite of Aspirin (acetyl salicylate). The main features of salicylate poisoning are hyperventilation, tinnitus, deafness, vasodilation and sweating. Complex acid-base disturbances occur.
Concurrent Tests	N/A
Dietary Requirements	N/A
Interpretation	In general, clinical features correlate poorly with blood salicylate concentrations. Therapeutic levels are typically <200 mg/L Symptoms of toxicity generally seen at >300 mg/L 300–500 mg/l (mild toxicity) 500–700 mg/l (moderate toxicity) >700 mg/l (severe toxicity) Samples should be taken 6 hours post dose to allow complete absorption. However, absorption may be delayed in overdose, especially if slow release or enteric-coated preparations are taken. There is also a risk of bezoar formation (a mass trapped in the gastrointestinal tract usually the stomach), further delaying absorption.
Collection Conditions	N/A
Frequency of testing	Repeat testing at 2-3 hour intervals may be required to ensure complete absorption has occurred.

Version 2.0 Date: 27/07/2014 Document agreed by: Andrew Davison