

## Advanced Instrumental Method of Analysis in Analytical Toxicology Laboratory for Toxicological Analysis

Abhijith Jayan<sup>\*1</sup>, Sreerag S<sup>2</sup>, Thanuja T<sup>3</sup>, Vipin Joseph<sup>4</sup>, Girish Kumar K<sup>5</sup>  
<sup>1,2,3,4,5</sup>Kerala University of Health Sciences, Government Medical College Thiruvananthapuram College of Pharmaceutical Sciences, Thiruvananthapuram, Kerala, India

Date of Submission: 15-07-2025

Date of Acceptance: 25-07-2025

### ABSTRACT

Major advances in analytical toxicology followed the introduction of spectroscopic and chromatographic techniques. Thin layer chromatography remains important together with some spectrophotometric and other tests. However, gas and high-performance liquid chromatography together with variety of enzyme immunoassay techniques are now widely used. Advanced instrumentation techniques that include UPLC and its hyphenated systems with MS, UHPLC and its hyphenated systems with MS, GC and its hyphenated systems with MS, headspace and FID. Analytical Toxicology being emerging as an emergency critical care service, these analytical techniques are to be used for better patient care in diagnosis and treatment of various poisoned victims.

### Keywords

UPLC – Ultra Performance Liquid Chromatography  
MS- Mass Spectroscopy  
GC- Gas Chromatography  
FID-Flame Ionisation Detector  
Headspace GC  
UHPLC- Ultra High Performance Liquid Chromatography  
QuEChERS

### I. INTRODUCTION

Toxicity is the degree to which a substance (a toxin or poison) can harm humans or animals. Toxicity may be acute or chronic. The potential causes of toxicities include therapeutic agents, house-hold chemicals, natural toxicants, food additives, traditional medicines, use of botanicals, drugs of abuse, and tolerance etc. Drug toxicity refers to the level of damage that a compound can cause to an organism. The toxic effects of a drug are dose-dependent and can affect an entire system as in the CNS or a specific organ such as the liver. Drug toxicities in humans manifest themselves as functional, biochemical, and/or structural changes.

Moreover, it is recommended that plasma concentrations of drugs having a narrow therapeutic range or with a highly variable response (such as in psychiatry) have to be measured. This accounts for antiepileptics, cardiac glycosides, aminoglycosides, antiarrhythmics, theophylline, immunosuppressants, lithium, antipsychotics and antidepressants, and anti-retrovirals, as well as for an increasing number of cytostatic and antimycotics, among others.

A toxicology lab is a specialized lab environment in which drug tests, also known as tox screens, are conducted to evaluate the presence of illicit substances. These labs are available to test any kind of illicit substance, including both recreational and prescription drugs. Toxicological analysis plays a useful role if diagnosis is in doubt, the administration of antidotes or protective agents is contemplated or the use of active elimination therapy is being considered. Analytical Toxicology Laboratory can fill an important role in dealing with acute and chronic cases of poisoning even when the causes of disaster are unclear. It helps in rapid identification and quantification of the toxic substance. In addition, this laboratory once developed can also contribute towards medical research specifically drug related toxicity studies both in man and animals and it can also help in studying and solving the problems of environmental pollution. A good service can be provided from a specialist regional toxicology centers which also have the access to advanced analytical techniques. In-patient or out-patient drug treatment facilities, Therapeutic drug monitoring, medically necessary testing (Toxicity/overdose etc.), pain management and compliance testing, identify the presence of illicit substances in blood, urine, saliva, and hair, toxicological analysis play a useful role if diagnosis is in doubt, the administration of antidotes or protective agents is contemplated or the use of active elimination therapy is being considered. At present Scenario the condition is that toxicology

analysis reports takes much time so that effective patient care cannot be provided at the right time. Also it takes more time for the doctor to administer the right antidote to the poisoned victim. Hence the need of advanced analytical techniques are very crucial in an Analytical Toxicology Laboratory as an emergency critical care service so that effective patient care and right choice of antidotes for poisons can be chosen immediately. The main objective is to make the analysis and detection of analytical and toxicological samples at much faster rate.

Analytical toxicology plays a crucial role in clinical diagnostics, forensic investigations, environmental monitoring, and pharmaceutical research. The need for rapid, accurate, and sensitive detection of toxic substances has led to the adoption of advanced techniques such as Ultra-Performance Liquid Chromatography-Tandem Mass Spectrometry (UPLC-MS/MS). Combining the enhanced resolution of UPLC with the sensitivity and specificity of tandem MS, this method is now widely recognized as the gold standard in toxicological analyses.

## II. UPLC-MS/MS

Ultra performance liquid chromatography quadrupled mass spectroscopy. The core principle of Ultra Performance Liquid Chromatography coupled with Tandem Mass Spectrometry (UPLC-MS/MS) lies in the combination of high-resolution chromatographic separation and highly selective mass-based detection. UPLC works on the principle of separating analytes based on their interaction with the stationary phase and the polarity of the mobile phase. Using columns packed with sub-2 micron particles and operating at ultra-high pressures (up to 15,000 psi), UPLC achieves much faster and more efficient separations than conventional HPLC. Once separated, compounds enter the MS/MS system where they are ionized, selected based on their mass-to-charge ratio ( $m/z$ ), fragmented in a collision cell, and then the product ions are detected. This sequence of selection, fragmentation, and detection in tandem mass spectrometry allows for highly specific and sensitive identification of compounds, even in complex biological matrices.

### 2.1 Principle

UPLC-MS/MS is an advanced analytical technique widely employed in toxicological analysis due to its superior sensitivity, resolution, and specificity. The compounds are separated

chromatographically, they are introduced into the mass spectrometer, where they undergo ionization—commonly through Electrospray Ionization (ESI) or Atmospheric Pressure Chemical Ionization (APCI). The first quadrupole (MS1) isolates a specific precursor ion, which is then fragmented in a collision cell. The resulting product ions are detected by the second quadrupole (MS2), enabling precise quantification and identification, even in complex biological matrices. First Quadrupole (Q1): Selects a specific ion known as the precursor ion. Collision Cell (q2): The precursor ion is fragmented using a neutral gas (commonly nitrogen or argon) through a process called collision-induced dissociation (CID). Second Quadrupole (Q3): Analyzes the resulting fragment (product) ions. The fragmentation pattern is highly specific to the structure of the compound, enabling precise identification. The use of Multiple Reaction Monitoring (MRM) in MS/MS enhances selectivity by monitoring only specific transitions from precursor to product ions. This reduces background noise and improves detection limits, making it highly suitable for analyzing trace levels of analytes in complex matrices. The combination of UPLC and MS/MS provides both separation and detection capabilities in a single integrated workflow. While UPLC resolves complex mixtures and reduces matrix interferences, MS/MS ensures high specificity through accurate mass detection and fragmentation profiling. This synergy makes UPLC-MS/MS exceptionally powerful for identifying and quantifying multiple toxins simultaneously with high sensitivity, even at parts-per-trillion concentrations.

### 2.2 Instrumentation and Construction

The construction of a UPLC-MS/MS system involves several key modules, each contributing to the precise functioning of the analytical process. The sample is introduced into the system through an autosampler or injector, which allows for consistent and automated injection volumes. The UPLC component consists of a high-pressure solvent delivery pump capable of maintaining pressures up to 15,000 psi, coupled with an analytical column packed with sub-2  $\mu$ m particles, which ensures efficient chromatographic separation. The eluent from the column is directed into the ion source, which may utilize Electrospray Ionization (ESI) or Atmospheric Pressure Chemical Ionization (APCI) to convert the liquid-phase analytes into gas-phase ions. These ions are then guided into the triple quadrupole mass

spectrometer. The first quadrupole filters a specific precursor ion based on its mass-to-charge ratio, the second quadrupole acts as a collision cell where the ion undergoes fragmentation, and the third quadrupole scans and detects the resulting product ions. The ion signal is finally captured by a detector, typically an electron multiplier, and processed using a dedicated data analysis system that facilitates identification and quantification.

### 2.3 Working

**Working Mechanism** The working of UPLC-MS/MS follows a streamlined workflow that ensures high precision and reproducibility. Initially, the prepared sample is introduced into the autosampler, which injects it into the mobile phase. The mobile phase, propelled by a high-pressure pump, carries the analyte through the analytical column, where separation occurs based on interactions between the analyte and the stationary phase. As the separated compounds elute from the column, they enter the ion source, where they are ionized into gas-phase ions. The ionized molecules are then transferred into the mass spectrometer's first quadrupole (Q1), which selects the precursor ions of interest. These ions proceed to the collision cell (q2), where they undergo collision-induced dissociation, producing specific fragment ions. The resulting product ions are analyzed in the third quadrupole (Q3), where selected ion transitions are monitored using Multiple Reaction Monitoring (MRM). The final signal is detected and quantified by the detector and interpreted through specialized software, yielding highly accurate qualitative and quantitative data on the target compounds.

### 2.4 Sample preparation

**Sample Preparation Techniques** Sample preparation is a critical pre-analytical step in UPLC-MS/MS workflows, aimed at enhancing the accuracy and sensitivity of the analysis by reducing matrix interferences and concentrating analytes. Depending on the complexity and type of the sample matrix, different preparation strategies are employed. Protein precipitation is commonly used for biological fluids like plasma and serum, where organic solvents such as acetonitrile or methanol are added to precipitate proteins, allowing the analytes to remain in solution. Liquid-liquid extraction (LLE) is another approach that involves partitioning analytes between two immiscible solvents based on their differential solubility, typically applied in drug and pesticide analysis. Solid phase extraction (SPE) offers higher

specificity and cleaner extracts by passing the sample through cartridges packed with sorbents that selectively retain analytes while washing away unwanted components. In cases where the matrix is relatively clean, a dilute-and-shoot method may be used, which involves simply diluting the sample and directly injecting it into the system. Samples are also subjected to QuEChERS depending on the matrix and target analytes. These preparatory methods are tailored based on the nature of the toxin, the sample matrix, and the desired sensitivity of the assay.

QuEChERS stands for Quick, Easy, Cheap, Effective, Rugged, and Safe. It is a sample preparation method primarily used in analytical chemistry for the determination of pesticide residues and other contaminants in food and environmental matrices. The QuEChERS method is based on solvent extraction and dispersive solid-phase extraction (d-SPE). It uses acetonitrile to extract analytes from a complex matrix and then cleans the extract with a mixture of salts and sorbents to remove unwanted matrix components.

### 2.5 Advantage

UPLC-MS/MS offers numerous advantages that have made it a vital tool in analytical toxicology. The technique is renowned for its extremely high sensitivity, capable of detecting analytes at femtogram to picogram levels, which is essential for trace-level analysis in complex matrices. Its selectivity is significantly enhanced through Multiple Reaction Monitoring (MRM), enabling the identification and quantification of specific analytes even in the presence of interfering substances. Another major advantage is the rapid analysis time, with most runs completed within a few minutes, making it suitable for high-throughput laboratories. The system requires only minimal sample volume, preserving valuable or limited specimens, and is robust enough to handle various biological and environmental matrices with minimal cross-contamination or carryover. Furthermore, it offers simultaneous qualitative and quantitative analysis, providing comprehensive information from a single injection.

### 2.6 Disadvantages

Disadvantages Despite its many strengths, UPLC-MS/MS also has several limitations. One of the primary drawbacks is the high cost associated with purchasing, maintaining, and operating the system. This includes not only the initial capital investment but also the recurring costs of

consumables, maintenance contracts, and software upgrades. Additionally, the system requires skilled operators with advanced training to ensure proper calibration, maintenance, and data interpretation. Ion suppression or enhancement due to matrix effects remains a persistent challenge, potentially affecting quantification accuracy. The instrument's sensitivity also necessitates stringent maintenance of the ion source, column, and other system components to avoid contamination and signal loss. Moreover, while sample preparation enhances performance, it can be time-consuming and complex for certain matrices, particularly when dealing with highly viscous or particulate-rich samples.

## 2.7 Application

Applications in Analytical Toxicology UPLC-MS/MS has a wide range of applications in analytical toxicology, owing to its versatility and high analytical performance. In forensic toxicology, it is employed for the detection of drugs of abuse, metabolites, and poisons in biological samples such as blood, urine, and hair. Its precision and sensitivity make it indispensable in post-mortem investigations and legal toxicology cases. In clinical toxicology, UPLC-MS/MS is used for therapeutic drug monitoring, diagnosis of overdoses, and evaluation of drug interactions in hospitalized or critically ill patients. Environmental toxicologists utilize the technique for assessing pollutants, pesticides, and heavy metals in water, soil, and air samples, thereby contributing to public health and regulatory compliance. In food safety, it helps detect harmful contaminants like mycotoxins, acrylamide, and antibiotic residues, ensuring food quality and safety. Industrial and occupational toxicology applications include the monitoring of exposure to hazardous chemicals, solvents, and volatile organic compounds, facilitating risk assessment and workplace safety.

UPLC-MS/MS has demonstrated remarkable effectiveness in identifying and quantifying a diverse array of toxins across various matrices. For instance, aflatoxins, which are carcinogenic mycotoxins produced by *Aspergillus* species, are routinely detected in food samples such as peanuts, maize, and spices. The method's ability to handle complex food matrices and detect these toxins at trace levels ensures regulatory compliance and food safety. In industrial or chemical exposure cases, cyanide—a potent metabolic toxin—is detected in blood and saliva samples, aiding in both clinical diagnosis and forensic investigations. In

substance abuse testing, UPLC-MS/MS is extensively used to identify illicit drugs such as cocaine and its metabolites in urine and hair, providing reliable evidence in legal and rehabilitation settings. Organophosphate pesticides, which pose severe neurotoxic risks, are monitored in plasma or serum to evaluate agricultural worker exposure. Additionally, paracetamol (acetaminophen) levels are measured in serum and urine in cases of overdose to guide clinical intervention. These examples underline the robustness, accuracy, and adaptability of UPLC-MS/MS in detecting both naturally occurring and synthetic toxicants across various fields of application.

## 2.8 Qualification and Validation Procedures

The successful implementation of UPLC-MS/MS in analytical toxicology requires rigorous qualification and validation procedures to ensure the reliability, accuracy, and consistency of analytical results. Qualification refers to the documented verification that the equipment and systems are installed, operate, and perform as intended. It typically includes four stages: Installation Qualification (IQ), Operational Qualification (OQ), Performance Qualification (PQ), and sometimes Design Qualification (DQ). IQ confirms that the UPLC-MS/MS system is installed according to manufacturer specifications. OQ verifies that the system functions within predetermined parameters (e.g., pressure limits, flow rates, detector sensitivity). PQ ensures the system can perform effectively under real operational conditions using actual sample types.

Validation, on the other hand, is the process of proving that an analytical method is suitable for its intended purpose. Key validation parameters include accuracy, precision (repeatability and intermediate precision), specificity, sensitivity (Limit of Detection and Limit of Quantitation), linearity, range, robustness, and system suitability. Method validation is typically performed in accordance with regulatory guidelines such as those from the ICH (Q2(R1)), FDA, or EMA. Robust validation ensures that the UPLC-MS/MS method provides reproducible and accurate results across different matrices, instruments, analysts, and environmental conditions. Documentation of both qualification and validation is essential for compliance with Good Laboratory Practices (GLP) and other regulatory frameworks.

### III. UHPLC-MS/MS

Ultra-High Performance Liquid Chromatography coupled with Tandem Mass Spectrometry (UHPLC-MS/MS) has emerged as a superior analytical technique for detecting and quantifying trace levels of toxicants in complex biological, pharmaceutical, and environmental matrices. Combining the enhanced chromatographic performance of UHPLC with the unparalleled sensitivity and specificity of MS/MS detection, this platform offers significant improvements over traditional methods. This paper explores the fundamental principles, instrumental design, operational workflow, sample preparation strategies, analytical strengths and limitations, application domains, and comprehensive qualification and validation practices associated with UHPLC-MS/MS in analytical toxicology.

#### 3.1. Principle

UHPLC-MS/MS operates based on two integrated principles. First, UHPLC leverages columns packed with sub-2-micron particles and high operating pressures (up to 15,000 psi) to achieve superior chromatographic separation. This results in sharper, more resolved peaks and shorter run times compared to conventional HPLC. Second, MS/MS utilizes tandem mass spectrometers—typically involving a triple quadrupole configuration—to detect and quantify analytes based on their mass-to-charge ( $m/z$ ) ratios. In MS/MS, ions produced from the UHPLC eluate are subjected to a first round of mass filtering (Q1), followed by fragmentation in a collision cell (Q2), and subsequent analysis of the product ions in a second mass filter (Q3). This enhances both selectivity and sensitivity for target analytes.

#### 3.2. Instrumentation and Construction

A typical UHPLC-MS/MS system comprises several key components: a UHPLC pump capable of generating ultra-high pressures, an autosampler for sample injection, a chromatographic column with sub-2  $\mu$ m particle size, a column oven for thermal stability, and a tandem mass spectrometer. The MS/MS unit includes an ionization source (commonly ESI or APCI), a triple quadrupole mass analyzer (Q1, Q2, Q3), a vacuum system, and data acquisition software. The robust hardware construction allows real-time ion monitoring, multiple reaction monitoring (MRM), and automated data interpretation. The system is usually housed in a

vibration-free, temperature-controlled laboratory space to ensure reproducibility.

#### 3.3. Working

In a typical UHPLC-MS/MS analysis, the sample is injected into the mobile phase stream and passed through a high-efficiency chromatographic column. As the analytes are separated based on their physicochemical properties (e.g., polarity, molecular weight), they elute at distinct retention times. These eluates are introduced into the ion source, where molecules are ionized and transferred into the MS/MS system. The first quadrupole selects precursor ions of interest, which are then fragmented in the collision cell using an inert gas (typically nitrogen or argon). The product ions generated are analyzed in the third quadrupole, and their intensities are measured to determine the presence and concentration of specific compounds.

#### 3.4. Sample Preparation

Sample preparation is a critical step to eliminate matrix interferences and concentrate analytes prior to UHPLC-MS/MS analysis. Common techniques include protein precipitation (for plasma and serum), liquid-liquid extraction (LLE), and solid-phase extraction (SPE) or subjecting to QuEChERS depending on the matrix and target analytes. These methods improve analyte recovery and reduce ion suppression. The choice of technique depends on the matrix complexity, target analyte properties, and required sensitivity. After extraction, samples are typically filtered through 0.22  $\mu$ m membranes and reconstituted in a suitable mobile phase before injection.

#### 3.5. Advantages

UHPLC-MS/MS offers several advantages over traditional HPLC or single-quadrupole systems. These include higher resolution chromatographic separation, faster analysis times, increased sensitivity and specificity, and the capability to analyze multiple analytes in a single run using MRM transitions. This makes the technique particularly suitable for high-throughput toxicology screening, therapeutic drug monitoring, and trace contaminant analysis. Furthermore, the robustness and reproducibility of the method contribute to improved data quality and regulatory acceptance.

### 3.6. Disadvantages

Despite its benefits, UHPLC-MS/MS also has some limitations. The high cost of instrumentation and maintenance, requirement for skilled personnel, and susceptibility to matrix effects (e.g., ion suppression) are notable challenges. In addition, the system's complexity necessitates rigorous quality control, and consumable components like columns and ion sources require periodic replacement. Method development can also be time-consuming, particularly for complex matrices.

### 3.7. Applications

UHPLC-MS/MS finds wide-ranging applications in clinical, forensic, environmental, and pharmaceutical toxicology. In clinical settings, it is used for therapeutic drug monitoring, detection of drugs of abuse, and biomarker analysis. Forensic laboratories employ it to identify poisons, drugs, and metabolites in postmortem specimens. Environmental scientists use the platform to quantify pesticides, heavy metals, and industrial contaminants in water, soil, and air samples. In pharmaceutical industries, UHPLC-MS/MS supports bioequivalence studies, impurity profiling, and pharmacokinetic investigations.

### 3.8. Qualification and Validation Procedures

Successful deployment of UHPLC-MS/MS systems requires rigorous qualification and method validation to ensure compliance with regulatory standards. Qualification involves four main stages:

- Design Qualification (DQ): Confirms that the chosen UHPLC-MS/MS system design meets analytical requirements for specific toxicology applications.
- Installation Qualification (IQ): Documents proper delivery, installation, and configuration of the equipment as per manufacturer specifications.
- Operational Qualification (OQ): Tests the performance of individual components under controlled conditions, including flow rate accuracy, column heating, and detector response.
- Performance Qualification (PQ): Assesses the system's performance under actual working conditions using standard toxicological samples.

Method validation ensures the analytical procedure's reliability, reproducibility, and regulatory compliance. Parameters include:

- Accuracy and Precision (measured using spike recovery and replicate analysis),
- Selectivity and Specificity (ensuring no interference from matrix components),
- Linearity and Range (using calibration curves across expected concentration ranges),
- LOD and LOQ (determining the minimum detectable and quantifiable levels), and
- Robustness and Stability (evaluating method performance under varied conditions).

All qualification and validation steps must be thoroughly documented following Good Laboratory Practices (GLP) and Good Manufacturing Practices (GMP), and aligned with international guidelines such as ICH Q2(R1) or FDA method validation guidance.

## IV. OTHER ADVANCED INSTRUMENTATION METHODS

Gas chromatography tandem mass spectroscopy, GC-FID, GC headspace can also be used in analytical toxicology laboratory for making analysis more easier and more accurate which will enable sustaining patient's life. GC-FID can be used to detect alcohol content in blood samples. GC headspace can be used to detect volatile poisons.

## V. ENZYME IMMUNOASSAY KITS

Enzyme Immunoassay (EIA) kits are widely utilized in analytical toxicology for the qualitative and quantitative determination of drugs, toxins, hormones, and other biomolecules in biological matrices. The principle of EIA is based on the specific antigen-antibody interaction, where an enzyme-labeled antigen or antibody is used to generate a detectable signal, typically a colorimetric, fluorometric, or chemiluminescent response, proportional to the analyte concentration. EIA formats include competitive and sandwich (non-competitive) assays, depending on the analyte size and antigenic properties. In a typical competitive EIA, the analyte in the sample competes with an enzyme-labeled counterpart for a limited number of antibody binding sites. In contrast, sandwich EIAs use two antibodies targeting different epitopes of the analyte, ideal for larger molecules.

The working of EIA involves coating a microplate well with capture antibodies, followed by sample addition and incubation to allow

antigen-antibody binding. After washing to remove unbound substances, an enzyme-labeled secondary antibody or conjugate is added. Subsequent addition of the enzyme's chromogenic substrate results in a color change, which is measured spectrophotometrically—commonly using optical density (OD) at a specific wavelength. The signal intensity inversely (in competitive) or directly (in sandwich) correlates with analyte concentration.

Sample preparation for EIA kits typically involves dilution, centrifugation, or simple extraction depending on the matrix. For biological fluids like urine, serum, or plasma, minimal pretreatment is required—centrifugation to remove particulates or proteins, pH adjustment, or dilution in buffer. Solid matrices (e.g., tissues, hair) may require homogenization and extraction with aqueous or organic buffers, followed by filtration or centrifugation. Some kits offer built-in sample preparation modules, enhancing simplicity and reproducibility.

The main advantages of EIA include high specificity, good sensitivity, simple operation, and cost-effectiveness. It is suitable for high-throughput screening and field-based applications, requiring only small sample volumes and standard laboratory equipment. Additionally, EIA is non-radioactive, unlike RIA (radioimmunoassay), making it safer and environmentally friendly. However, EIA also presents some disadvantages. These include cross-reactivity with structurally similar compounds, matrix interferences, limited dynamic range, and semi-quantitative outcomes if not properly calibrated. Furthermore, enzymatic activity can be affected by improper handling or storage, impacting accuracy.

EIA kits find broad applications in clinical toxicology, forensic screening, anti-doping analysis, environmental monitoring, and food residue detection. In clinical and forensic settings, EIAs are routinely used for initial screening of drugs of abuse such as opiates, amphetamines, benzodiazepines, and cannabinoids in urine or serum. They are also employed in detecting mycotoxins, pesticides, and veterinary drug residues in food matrices.

Method validation for EIA-based assays follows regulatory guidelines (e.g., FDA, EMA, WHO) and includes the evaluation of accuracy, precision, specificity, sensitivity, linearity, limit of detection (LOD), limit of quantification (LOQ), recovery, robustness, and stability. Accuracy and precision are assessed using quality control samples spiked at various concentrations, while linearity is

verified over a calibration range. LOD and LOQ are determined by analyzing blank samples and calculating signal-to-noise ratios. Specificity is assessed through interference testing with related substances. Matrix effects are evaluated by comparing results from different biological matrices. Intra- and inter-assay reproducibility and recovery studies ensure the robustness and reliability of the assay. Final validation also includes system suitability tests, blank runs, and compliance with predefined acceptance criteria.

## VI. PROCURING SOURCES

Procurement of sophisticated analytical instruments such as UPLC-MS/MS, UHPLC-MS/MS, GC-MS/MS, GC-FID, GC with headspace samplers, and enzyme kits requires sourcing from globally recognized manufacturers who ensure regulatory compliance, service support, calibration, and documentation. For UPLC and UHPLC systems coupled with tandem mass spectrometry (MS/MS), leading suppliers include Waters Corporation (USA), which offers the ACQUITY UPLC with Xevo TQ series; SCIEX (USA), known for its Triple Quad 5500+ and QTRAP systems; Agilent Technologies (USA), which provides the 6495C Triple Quadrupole LC/MS along with InfinityLab UHPLC; Thermo Fisher Scientific (USA), offering the TSQ Altis/Quantis series with Vanquish UHPLC; and Shimadzu (Japan), known for its Nexera X2 coupled with LCMS-8060. For GC-MS/MS systems, Agilent, Thermo Fisher, Shimadzu, and PerkinElmer are primary providers, offering platforms like the 8890 GC-7010C (Agilent), TRACE 1310 with TSQ 9000 (Thermo), and GCMS-TQ8050 NX (Shimadzu). GC systems with Flame Ionization Detectors (FID), suitable for hydrocarbon and FAME analysis, are also widely available from these manufacturers. For analysis of volatile organic compounds via headspace sampling, equipment like Agilent's 7697A Headspace Sampler, Thermo's TriPlus 300, and Shimadzu's HS-20 are highly recommended.

Enzyme kits essential for biochemical and toxicological assays are widely available from reputed vendors such as Sigma-Aldrich (Merck), Thermo Fisher Scientific (Invitrogen and Pierce brands), Quidel Triage Tox Drug Screen, Bio-Rad, Abcam, and Roche Diagnostics. These suppliers provide enzyme activity kits, ELISA kits, and other bioassay tools with high sensitivity and specificity, suitable for applications like biomarker quantification, pesticide detection, and clinical diagnostics.

In India, most of these manufacturers operate through certified distributors such as Spinco Biotech, Labindia Instruments, and Thermo Fisher Scientific India Pvt Ltd. Government organizations and academic institutions typically procure these instruments through platforms like the Government e-Marketplace (GeM) or via public tendering (eProcurement). It is essential to ensure that procurement includes post-installation support, training, and compliance documentation such as DQ, IQ, OQ, PQ reports. Preference should be given to suppliers who offer Annual Maintenance Contracts (AMC), Preventive Maintenance Contracts (PMC), and validated system performance guarantees to meet regulatory expectations under GLP/GMP environments.

## VII. CONCLUSION

Advanced instrumental techniques have revolutionized the field of analytical toxicology by improving detection limits, increasing throughput, and enabling multi-residue analysis. Techniques like LC-MS/MS and HRMS are now central in forensic and clinical toxicology labs, while ICP-MS serves as the gold standard for metal analysis. Future trends suggest further integration of machine learning with instrumental analysis to enhance data interpretation and decision-making in toxicology.

## REFERENCES

- [1]. Fundamentals of Analytical Toxicology  
Robert J. Flanagan, Andrew Taylor, Ian D. Watson, Robin Whelpton © 2007 John Wiley & Sons, Ltd. ISBN: 978-0-470-31934-5
- [2]. Rosano, T.G.; Wood, M.; Ihenetu, K.; Swift, T.A. Drug screening in medical examiner casework by high-resolution mass spectrometry (UPLC-MSE-TOF). *J. Anal. Toxicol.* 2013.
- [3]. A validated UHPLC-MS/MS method for simultaneous quantification of some repurposed COVID-19 drugs in rat plasma: Application to a pharmacokinetic study Noha F. El Azab Pharmaceutical Analytical Chemistry Department, Faculty of Pharmacy, Ain Shams University, African Union Organization Street, Abbassia, Cairo, Egypt <https://www.elsevier.com/locate/microc>.
- [4]. P. C. Kamboj Pharmaceutical Analysis – II (Instrumental methods). First edition, Vallabh Publications; 2010.
- [5]. A.H. Beckett, J. B. Stenlake, Practical Pharmaceutical Chemistry –Part Two Fourth edition CBS Publishers and Distributors, New Delhi (India); 2001
- [6]. F. Tagliaro, ... S.W. Lewis, in Encyclopedia of Forensic Sciences (Second Edition); 2013 (Science direct).
- [7]. B. K. Sharma, Instrumental Methods of Chemical Analysis-Twenty Seventh Edition; 2011.
- [8]. Indian Pharmacopoeia, Volume 1, The Pharmacopoeial commission Ghaziabad 2007.
- [9]. Skoog DA, Holler FJ, Crouch SR. Principles of Instrumental Analysis, 7th ed. Boston (USA): Cengage Learning Publishers;2016.
- [10]. Vogel AI. Text book of Quantitative Chemical Analysis, 5th ed. New York (USA): Longman Scientific & Technical Publisher;1989.
- [11]. Sharma YR. Elementary Organic Spectroscopy, 5th rev. ed. New Delhi (India): S Chand Publishers;2013.
- [12]. Clarke's Analysis of Drugs and Poisons in pharmaceuticals, body fluids and postmortem material 4<sup>th</sup> edition Consulting Editors Anthony C Moffat M David Osselton Brian Widdop Published by Pharmaceutical Press 1 Lambeth High Street, London SE1 7JN, UK 1559 St Paul Avenue, Gurnee, IL 60031, USA #Pharmaceutical Press 2011.
- [13]. Joye, T.; Sidibé, J.; Déglon, J.; Karmime, A.; Sporkert, F.; Widmer, C.; Favrat, B.; Lescuyer, P.; Augsburger, M.; Thomas, A. Liquid chromatography-high resolution mass spectrometry for broad-spectrum drug screening of dried blood spot as microsampling procedure. *Anal. Chim. Acta* 2019.
- [14]. Mercolini, L.; Mandrioli, R.; Sorella, V.; Somaini, L.; Giocondi, D.; Serpelloni, G.; Raggi, M.A. Dried blood spots: Liquid chromatography-mass spectrometry analysis of delta (9)-tetrahydrocannabinol and its main metabolites. *J. Chromatogr. A* 2013.
- [15]. Mandrioli, R.; Mercolini, L.; Protti, M. Blood and Plasma Volumetric Absorptive Microsampling (VAMS) Coupled to LC-

MS/MS for the Forensic Assessment of Cocaine Consumption. *Molecules* 2020.

[16]. Pragst, F.; Herzler, M.; Erxleben, B.T. Systematic toxicological analysis by high-performance liquid chromatography with diode array detection (HPLC-DAD). *Clin. Chem. Lab. Med.* 2004.

[17]. Marquet, P. Progress of liquid chromatography-mass spectrometry in clinical and forensic toxicology. *Ther. Drug Monit.* 2002.

[18]. Wu,A.H.B.; Gerona, R.; Armenian, P.; French, D.; Petrie, M.; Lynch, K.L. Role of liquid chromatography-high-resolution mass spectrometry (LC-HR/MS) in clinical toxicology. *Clin. Toxicol.* 2012.

[19]. Reviewer Guidance, Validation of chromatographic methods. Center for Drug Evaluation and Research (CDER), (1994).

[20]. Maurer, H.H. Systematic toxicological analysis of drugs and their metabolites by gas chromatography-mass spectrometry. *Journalist of Chromatography* 1992.

[21]. Flanagan, R. J., Braithwaite, R. A., & Widdop, S. S. (1995). *Basic Analytical Toxicology*. Geneva: World Health Organization.

[22]. Hussain, C. M. (2020). *Handbook of Analytical Techniques for Forensic Samples*. Elsevier.

[23]. Manahan, S. E. (2002). *Toxicological Chemistry and Biochemistry*. 3rd Edition. CRC Press.

[24]. Herres, J., Steuer, A. E., et al. (2020). Recent Advances in Mass Spectrometry for Forensic Toxicology. *Journal of Analytical Toxicology*.

[25]. Ojanperä, I., Kolmonen, M., Pelander, A. (2006). Applications of LC-MS in Toxicology. *Forensic Science International*.

[26]. ICH. (2005). ICH Harmonised Tripartite Guideline Q2(R1): Validation of Analytical Procedures.

[27]. UNODC. (2012). Recommended Methods for the Identification and Analysis of Cocaine in Seized Materials. United Nations Office on Drugs and Crime.

[28]. Baselt, R. C. (2017). *Disposition of Toxic Drugs and Chemicals in Man*. 12th Edition. Biomedical Publications.

[29]. Polettini, A. (2006). Applications of LC-MS in Clinical Toxicology. *Clinical Biochemistry*, 39(6).

[30]. Nair, V. D. (2019). LC-MS/MS in Toxicology Screening. In *Analytical Toxicology* (pp. 101–120). Springer.

[31]. Karch, S. B. (2008). *Drug Abuse Handbook*. 2<sup>nd</sup> Edition. CRC Press.

[32]. Peters, F. T., Drummer, O. H., & Musshoff, F. (2007). Validation of New Methods. *Forensic Science International*.

[33]. Barcelo, D. (2007). *Comprehensive Analytical Chemistry: Environmental Analysis by Electrochemical Sensors and Biosensors*. Elsevier.

[34]. Taylor, P. J. (2005). Matrix Effects: LC-MS Analysis. *Clinical Biochemistry*, 38(4).

[35]. Gottfried, M. R. (2003). GC-MS in Forensic Drug Testing. *Journal of Chromatographic Science*.

[36]. Wilhelm, M., et al. (2008). ICP-MS in Toxicological Analysis of Metals. *Toxicology Letters*.

[37]. Tiscione, N. B., Alford, I. (2014). Blood Alcohol Determination by Headspace GC. *Forensic Science Review*.

[38]. Wilhelm, M., et al. (2008). ICP-MS in Toxicological Analysis of Metals. *Toxicology Letters*.

[39]. Alpert, A. J. (1990). Hydrophilic-Interaction Chromatography for LC-MS. *Journal of Chromatography A*.

[40]. Levine, B. (2010). *Principles of Forensic Toxicology*. 3<sup>rd</sup> Edition. AACC Press.

[41]. Goldberger, B. A. (2003). *Handbook of Workplace Drug Testing*. Humana Press.

[42]. Kintz, P., et al. (2004). Hair Analysis for Drug Detection. *Forensic Science International*.

[43]. Drummer, O. H. (2001). *Postmortem Toxicology: GC-MS and LC-MS*. *Forensic Science International*.

[44]. Reichardt, C., & Welton, T. (2011). *Solvents and Solvent Effects in Organic Chemistry*. Wiley-VCH.

[45]. Dinis-Oliveira, R. J., et al. (2010). *Pharmacokinetics and Toxicological Analysis*. *Current Drug Metabolism*.

[46]. Rodrigues, S. M., et al. (2006). Heavy Metal Detection Using AAS and ICP-MS. *Environmental Pollution*.

[47]. Wells, D. A. (2003). High Throughput Bioanalytical Sample Preparation. Elsevier.

[48]. Snyder, L. R., Kirkland, J. J., & Dolan, J. W. (2011). Introduction to Modern Liquid Chromatography. 3<sup>rd</sup> Edition. Wiley.

[49]. De Zeeuw, J. (2005). Fast GC and GC-MS. LCGC Europe.

[50]. Korfomacher, W. A. (2005). LC-MS in Drug Discovery. John Wiley & Sons.

[51]. Scriba, G. K. E. (2016). Chiral Analysis in Toxicology. Trends in Analytical Chemistry.

[52]. Musshoff, F., & Madea, B. (2007). LC-MS/MS in Forensic Toxicology. Therapeutic Drug Monitoring.

[53]. Smith, R. M. (2004). Understanding Mass Spectra: A Basic Approach. Wiley-Interscience.

[54]. Watson, D. G. (2012). Pharmaceutical Analysis: A Textbook for Pharmacy Students. Elsevier Health Sciences.

[55]. Zhou, Z., et al. (2010). High-Resolution MS for Drug Metabolite Identification. Drug Metabolism and Disposition.

[56]. Miller, J. N., & Miller, J. C. (2010). Statistics and Chemometrics for Analytical Chemistry. 6<sup>th</sup> Edition. Pearson Education.

[57]. Rodríguez-Cruz, M. S., & Poole, C. F. (2007). Solid Phase Extraction and Sample Prep. Journal of Chromatography A.

[58]. Wells, R. J. (2002). Quantitative Analysis Using HPLC. Analytical Chemistry.

[59]. Wester, D. W., & Waldrop, M. M. (2013). Use of HRMS in Forensic Labs. Forensic Chemistry Review.

[60]. Gergov, M., et al. (2009). LC-MS/MS in Routine Toxicological Analysis. Analytical and Bioanalytical Chemistry.

[61]. Kostakis, I., et al. (2013). Interpretation of Blood Drug Concentrations. Therapeutic Drug Monitoring.

[62]. Bosch, R. J., et al. (2006). Environmental Monitoring by ICP-MS. Journal of Environmental Sciences.

[63]. Wells, J. (2007). High-Throughput Screening in Toxicology. Analytical and Bioanalytical Chemistry.

[64]. Pragst, F., & Balikova, M. A. (2006). State of the Art in Hair Analysis. Forensic Science International.

[65]. Covaci, A., et al. (2011). GCxGC-TOF-MS in Environmental Toxicology. Journal of Chromatography A.

[66]. Coulter, C., et al. (2009). LC-MS/MS for Cannabinoids in Blood. Journal of Analytical Toxicology.

[67]. Stoeckel, K. (2009). Use of LC-HRMS for unknowns. J. Mass Spectrom.

[68]. De Zeeuw, J. (2005). Fast GC for forensic applications. LCGC Europe.

[69]. Snyder, L. R., Kirkland, J. J., Dolan, J. W. (2011). Introduction to Modern Liquid Chromatography (3<sup>rd</sup> ed.). Wiley.

[70]. Nuijten, M. (2020). LC-QTOF-MS in drug monitoring. Ther. Drug Monit.

[71]. Kaufman, R. E., & Bowers, L. D. (1993). Enzyme immunoassay in clinical and forensic toxicology. Clinics in Laboratory Medicine, 13(4), 767–787.

[72]. Gillenwater, H. Y., et al. (1991). Evaluation of enzyme immunoassay kits for the detection of abused drugs. Journal of Analytical Toxicology, 15(1), 25–29.

[73]. Cody, J. T. (2001). Enzyme immunoassay for drugs of abuse testing. Forensic Science Review, 13(2), 141–151.

[74]. Udelhoven, T., et al. (2000). Rapid immunoassay methods for pesticide and drug residue detection. Analytical and Bioanalytical Chemistry, 368(5), 564–571.

[75]. Sundström, M., et al. (2014). Enzyme immunoassay screening versus LC-MS/MS in workplace drug testing. Journal of Analytical Toxicology, 38(9), 659–664.

[76]. West, R., & Venner, H. (2006). Immunoassays in toxicology: A practitioner's guide. Therapeutic Drug Monitoring, 28(1), 23–26.

[77]. O'Neal, C. L., et al. (2000). Immunoassay as a screening tool in drug testing: Current practice and limitations. Clinical Chemistry, 46(9), 1221–1230.

[78]. World Health Organization. (1997). Guidelines for Poison Control. Geneva: WHO.

[79]. World Health Organization, IPCS. (2009). The INTOX Data Management System: Information and Resources for Poison Centres. Geneva: WHO/IPCS.

[80]. American Association of Poison Control Centers (AAPCC). (2023). National Poison Data System (NPDS) Annual Report. Washington, DC: AAPCC.

- [81]. Persson, H. E., Sjoberg, G. K., Haines, J. A., & Pronczuk de Garbino, J. (1998). Poisoning severity score: Grading of acute poisoning. *Journal of Toxicology: Clinical Toxicology*, 36(3).
- [82]. Hsu, M. H., Chou, H. Y., Wu, K. Y., & Lin, S. C. (2013). Simultaneous determination of eight benzodiazepines in urine by UPLC-MS/MS. *Journal of Chromatography B*, 934, 77–82. <https://doi.org/10.1016/j.jchromb.2013.07.018>
- [83]. Zhou, Y., He, X., & Liu, Y. (2016). Rapid determination of multiple drugs in human plasma by UPLC-MS/MS and its application to forensic toxicology. *Journal of Chromatography B*, 1020, 131–138. <https://doi.org/10.1016/j.jchromb.2016.03.021>
- [84]. Molnar, D., Szuets, G., & Kalasz, H. (2021). Simultaneous determination of 30 psychoactive drugs in whole blood using UPLC-MS/MS. *Journal of Analytical Toxicology*, 45(5), 436–445. <https://doi.org/10.1093/jat/bkab024>