# One Step Multi-Drug Screen Test Card with Integrated E-Z Split Key™ Cup

## with Adulteration Strip for Oxidants, pH and Specific Gravity

### Instruction Sheet for testing of any combination of the following drugs: AMP/BAR/BZO/COC/THC/MTD/mAMP/MDMA/MOP/OPI/PCP/TCA

***A rapid, one step screening test for the simultaneous, qualitative detection of multiple drugs and drug metabolites in human urine.***

***For healthcare professionals including professionals at point of care sites.***

***For in vitro diagnostic use only.***

## INTENDED USE

The One Step Multi-Drug Screen Test Card with the integrated cup is a lateral flow chromatographic immunoassay for the qualitative detection of multiple drugs and drug metabolites in urine at the following cut-off concentrations:

| Test | Calibrator | Cut-off |
|---|---|---|
| Amphetamine (AMP) | D-Amphetamine | 1,000 ng/mL |
| Barbiturates (BAR) | Secobarbital | 300 ng/mL |
| Benzodiazepines (BZO) | Oxazepam | 300 ng/mL |
| Cocaine (COC) | Benzoylecgonine | 300 ng/mL |
| Marijuana (THC) | 11-nor-$\Delta^9$-THC-9 COOH | 50 ng/mL |
| Methadone (MTD) | Methadone | 300 ng/mL |
| Methamphetamine (mAMP) | D-Methamphetamine | 1,000 ng/mL |
| Methylenedioxymethamphetamine (MDMA) | D,L Methylenedioxymethamphetamine | 500 ng/mL |
| Morphine (MOP 300) | Morphine | 300 ng/mL |
| Opiates (OPI 2000) | Morphine | 2,000 ng/mL |
| Phencyclidine (PCP) | Phencyclidine | 25 ng/mL |
| Tricyclic Antidepressants (TCA) | Nortriptyline | 1,000 ng/mL |

**Configurations of the One Step Multi-Drug Screen Test Card with Integrated Cup come with any combination of the above listed drug analytes. This assay provides only a preliminary analytical test result. A more specific alternate chemical method must be used in order to obtain a confirmed analytical result. Gas chromatography/mass spectrometry (GC/MS) is the preferred confirmatory method. Clinical consideration and professional judgment should be applied to any drug of abuse test result, particularly when preliminary positive results are indicated.**

## SUMMARY

The One Step Drug Screen Test Card is a rapid urine screening test that can be performed without the use of an instrument. The test utilizes monoclonal antibodies to selectively detect elevated levels of specific drugs in urine.

### AMPHETAMINE (AMP)

Amphetamine is a Schedule II controlled substance available by prescription (Dexedrine®) and is also available on the illicit market. Amphetamines are a class of potent sympathomimetic agents with therapeutic applications. They are chemically related to the human body's natural catecholamines: epinephrine and norepinephrine. Acute higher doses lead to enhanced stimulation of the central nervous system and induce euphoria, alertness, reduced appetite, and a sense of increased energy and power. Cardiovascular responses to Amphetamines include increased blood pressure and cardiac arrhythmias. More acute responses produce anxiety, paranoia, hallucinations, and psychotic behavior. The effects of Amphetamines generally last 2-4 hours following use and the drug has a half-life of 4-24 hours in the body. About 30% of Amphetamines are excreted in the urine in unchanged form, with the remainder as hydroxylated and deaminated derivatives.

The One Step Drug Screen Test Card yields a positive result when Amphetamines in urine exceed 1,000 ng/mL. This is the suggested screening cut-off for positive specimens set by the Substance Abuse and Mental Health Services Administration (SAMHSA, USA). [4]

### BARBITURATES (BAR)

Barbiturates are central nervous system depressants. They are used therapeutically as sedatives, hypnotics, and anticonvulsants. Barbiturates are almost always taken orally as capsules or tablets. The effects resemble those of intoxication with alcohol. Chronic use of barbiturates leads to tolerance and physical dependence.

Short acting Barbiturates taken at 400 mg/day for 2-3 months can produce a clinically significant degree of physical dependence. Withdrawal symptoms experienced during periods of drug abstinence can be severe enough to cause death.

Only a small amount (less than 5%) of most Barbiturates are excreted unaltered in the urine.

The approximate detection time limits for Barbiturates are:

| | | |
|---|---|---|
| Short acting (e.g. Secobarbital) | 100 mg PO (oral) | 4.5 days |
| Long acting (e.g. Phenobarbital) | 400 mg PO (oral) | 7 days[1] |

The One Step Drug Screen Test Card yields a positive result when the Barbiturates in urine exceed 300 ng/mL.

### BENZODIAZEPINES (BZO)

Benzodiazepines are medications that are frequently prescribed for the symptomatic treatment of anxiety and sleep disorders. They produce their effects via specific receptors involving a neurochemical called gamma aminobutyric acid (GABA). Because they are safer and more effective, Benzodiazepines have replaced barbiturates in the treatment of both anxiety and insomnia. Benzodiazepines are also used as sedatives before some surgical and medical procedures, and for the treatment of seizure disorders and alcohol withdrawal.

Risk of physical dependence increases if Benzodiazepines are taken regularly (e.g., daily) for more than a few months, especially at higher than normal doses. Stopping abruptly can bring on such symptoms as trouble sleeping, gastrointestinal upset, feeling unwell, loss of appetite, sweating, trembling, weakness, anxiety and changes in perception.

Only trace amounts (less than 1%) of most Benzodiazepines are excreted unaltered in the urine; most of the concentration in urine is conjugated drug. The detection period for the Benzodiazepines in the urine is 3-7 days.

The One Step Drug Screen Test Card yields a positive result when the Benzodiazepines in urine exceed 300 ng/mL.

### COCAINE (COC)

Cocaine is a potent central nervous system (CNS) stimulant and a local anesthetic. Initially, it brings about extreme energy and restlessness while gradually resulting in tremors, over-sensitivity and spasms. In large amounts, cocaine causes fever, unresponsiveness, difficulty in breathing and unconsciousness.

Cocaine is often self-administered by nasal inhalation, intravenous injection and free-base smoking. It is excreted in the urine in a short time primarily as Benzoylecgonine [2, 3]. Benzoylecgonine, a major metabolite of cocaine, has a longer biological half-life (5-8 hours) than cocaine (0.5-1.5 hours), and can generally be detected for 24-48 hours after cocaine exposure.[3]

The One Step Drug Screen Test Card yields a positive result when the cocaine metabolite in urine exceeds 300 ng/mL. This is the suggested screening cut-off for positive specimens set by the Substance Abuse and Mental Health Services Administration (SAMHSA, USA). [4]

### MARIJUANA (THC)

THC ($\Delta^9$--tetrahydrocannabinol) is the primary active ingredient in cannabis (marijuana). When smoked or orally administered, THC produces euphoric effects. Users have impaired short term memory and slowed learning. They may also experience transient episodes of confusion and anxiety. Long-term, relatively heavy use may be associated with behavioral disorders. The peak effect of marijuana administered by smoking occurs in 20-30 minutes and the duration is 90-120 minutes after one cigarette. Elevated levels of urinary metabolites are found within hours of exposure and remain detectable for 3-10 days after smoking. The main metabolite excreted in the urine is 11-nor-$\Delta^9$-tetrahydrocannabinol-9-carboxylic acid ($\Delta^9$-THC-COOH).

The One Step Drug Screen Test Card yields a positive result when the concentration of THC-COOH in urine exceeds 50 ng/mL. This is the suggested screening cut-off for positive specimens set by the Substance Abuse and Mental Health Services Administration (SAMHSA, USA). [4]

### METHADONE (MTD)

Methadone is a narcotic analgesic prescribed for the management of moderate to severe pain and for the treatment of opiate dependence (heroin, Vicodin, Percocet, Morphine). The pharmacology of oral Methadone is very different from IV Methadone. Oral Methadone is partially stored in the liver for later use. IV Methadone acts more like heroin. In most states you must go to a pain clinic or a Methadone maintenance clinic to be prescribed Methadone.

Methadone is a long acting pain reliever producing effects that last from twelve to forty-eight hours. Ideally, Methadone frees the client from the pressures of obtaining illegal heroin, from the dangers of injection, and from the emotional roller coaster that most opiates produce. Methadone, if taken for long periods and at large doses, can lead to a very long withdrawal period. The withdrawals from Methadone are more prolonged and troublesome than those provoked by heroin cessation, yet the substitution and phased removal of methadone is an acceptable method of detoxification for patients and therapists.[1]

The MTD One Step Methadone Test Card yields a positive result when the Methadone in urine exceeds 300 ng/mL.

### METHAMPHETAMINE (mAMP)

Methamphetamine is an addictive stimulant drug that strongly activates certain systems in the brain. Methamphetamine is closely related chemically to amphetamine, but the central nervous system effects of Methamphetamine are greater. Methamphetamine is made in illegal laboratories and has a high potential for abuse and dependence. The drug can be taken orally, injected, or inhaled. Acute higher doses lead to enhanced stimulation of the central nervous system and induce euphoria, alertness, reduced appetite, and a sense of increased energy and power. Cardiovascular responses to Methamphetamine include increased blood pressure and cardiac arrhythmias. More acute responses produce anxiety, paranoia, hallucinations, psychotic behavior, and eventually, depression and exhaustion. The effects of Methamphetamine generally last 2-4 hours and the drug have a half-life of 9-24 hours in the body. Methamphetamine is excreted in the urine as amphetamine and oxidized and deaminated derivatives. However, 10-20% of Methamphetamine is excreted unchanged. Thus, the presence of the parent compound in the urine indicates Methamphetamine use. Methamphetamine is generally detectable in the urine for 3-5 days, depending on urine pH level.

The One Step Drug Screen Test Card yields a positive result when the Methamphetamine in urine exceeds 1,000 ng/mL.

### METHYLENEDIOXYMETHAMPHETAMINE (MDMA)

Methylenedioxymethamphetamine (ecstasy) is a designer drug first synthesized in 1914 by a German drug company for the treatment of obesity.[6] Those who take the drug frequently report adverse effects, such as increased muscle tension and sweating. MDMA is not clearly a stimulant, although it has, in common with amphetamine drugs, a capacity to increase blood pressure and heart rate. MDMA does produce some perceptual changes in the form of increased sensitivity to light, difficulty in focusing, and blurred vision in some users. Its mechanism of action is thought to be via release of the neurotransmitter serotonin. MDMA may also release dopamine, although the general opinion is that this is a secondary effect of the drug (Nichols and Oberlender, 1990). The most pervasive effect of MDMA, occurring in virtually all people who took a reasonable dose of the drug, was to produce a clenching of the jaws. The One Step Drug Screen Test Card yields a positive result when the Methylenedioxymethamphetamine in urine exceeds 500 ng/mL.

### OPIATE (MOP 300)

Opiate refers to any drug that is derived from the opium poppy, including the natural products, morphine and codeine, and the semi-synthetic drugs such as heroin. Opioid is more general, referring to any drug that acts on the opioid receptor.

Opioid analgesics comprise a large group of substances which control pain by depressing the central nervous system. Large doses of morphine can produce higher tolerance levels, physiological dependency in users, and may lead to substance abuse. Morphine is excreted unmetabolized, and is also the major metabolic product of codeine and heroin. Morphine is detectable in the urine for several days after an opiate dose.[1]

The One Step Drug Screen Test Card yields a positive result when the concentration of opiate exceeds the 300 ng/mL cut-off level.

### OPIATE (2000)

The One Step Drug Screen Test Card yields a positive result when the morphine in urine exceeds 2,000 ng/mL. This is the suggested screening cut-off for positive specimens set by the Substance Abuse and Mental Health Services Administration (SAMHSA, USA).[4] See opiate (MOP 300) for a summary.

### PHENCYCLIDINE (PCP)

Phencyclidine, also known as PCP or Angel Dust, is a hallucinogen that was first marketed as a surgical anesthetic in the 1950's. It was removed from the market because patients receiving it became delirious and experienced hallucinations.

Phencyclidine is used in powder, capsule, and tablet form. The powder is either snorted or smoked after mixing it with marijuana or vegetable matter. Phencyclidine is most commonly administered by inhalation but can be used intravenously, intra-nasally, and orally. After low doses, the user thinks and acts swiftly and experiences mood swings from euphoria to depression. Self-injurious behavior is one of the devastating effects of Phencyclidine.

PCP can be found in urine within 4 to 6 hours after use and will remain in urine for 7 to 14 days, depending on factors such as metabolic rate, user's age, weight, activity, and diet.[5] Phencyclidine is excreted in the urine as an unchanged drug (4% to 19%) and conjugated metabolites (25% to 30%).[6]

The One Step Drug Screen Test Card yields a positive result when the phencyclidine level in urine exceeds 25 ng/mL. This is the suggested screening cut-off for positive specimens set by the Substance Abuse and Mental Health Services Administration (SAMHSA, USA).

### TRICYCLIC ANTIDEPRESSANTS (TCA)

TCA (Tricyclic Antidepressants) are commonly used for the treatment of depressive disorders. TCA overdoses can result in profound central nervous system depression, cardiotoxicity and anticholinergic effects. TCA overdose is the most common cause of death from prescription drugs. TCAs are taken orally or sometimes by injection. TCAs are metabolized in the liver. Both TCAs and their metabolites are excreted in urine mostly in the form of metabolites for up to ten days.

The One Step Drug Screen Test Card yields a positive result when the concentration Tricyclic Antidepressants in urine exceeds 1,000 ng/mL.

The One Step Multi-Drug Screen Test Card with Integrated Cup also includes an adulteration strip that tests for Oxidants, pH and Specific gravity. The colors of the test strips are compared with the color chart to determine if the sample has been adulterated.

## PRINCIPLE

The One Step Multi-Drug Screen Test Card with the integrated cup is an immunoassay based on the principle of competitive binding. Drugs which may be present in the urine specimen compete against their respective drug conjugate for binding sites on their specific antibody.

During testing, a urine specimen migrates upward by capillary action. A drug, if present in the urine specimen below its cut-off concentration, will not saturate the binding sites of its specific antibody. The antibody will then react with the drug-protein conjugate and a visible colored line will show up in the test line region of the specific drug strip. The presence of drug above the cut-off concentration will saturate all the binding sites of the antibody. Therefore, the colored line will not form in the test line region.

A drug-positive urine specimen will not generate a colored line in the specific test line region of the strip because of drug competition, while a drug-negative urine specimen will generate a line in the test line region because of the absence of drug competition.

To serve as a procedural control, a colored line will always appear at the control line region, indicating that proper volume of specimen has been added and membrane wicking has occurred.

## REAGENTS

The test contains a membrane strip coated with drug-protein conjugates (purified bovine albumin) on the test line, a goat polyclonal antibody against gold-protein conjugate at the control line, and a dye pad

which contains colloidal gold particles coated with mouse monoclonal antibody specific to Amphetamine, Cocaine, Methamphetamine, Methylenedioxymethamphetamine, Morphine, THC, Phencyclidine, Benzodiazepine, Methadone, Barbiturate or Tricyclic antidepressants.

## PRECAUTIONS

- For healthcare professionals including professionals at point of care sites.
- For *in vitro* diagnostic use only. Do not use after the expiration date.
- The test panel should remain in the sealed pouch until use.
- All specimens should be considered potentially hazardous and handled in the same manner as an infectious agent.
- The used test card should be discarded according to federal, state and local regulations.

## STORAGE AND STABILITY

Store as packaged in the sealed pouch at 15-30°C. The test is stable through the expiration date printed on the sealed pouch. The test devices must remain in the sealed pouch until use. DO NOT FREEZE. Do not use beyond the expiration date.

## SPECIMEN COLLECTION AND PREPARATION

### Urine Assay

The urine specimen must be collected in a clean and dry container. Urine collected at any time of the day may be used. Urine specimens exhibiting visible precipitates should be centrifuged, filtered, or allowed to settle to obtain a clear specimen for testing.

### Specimen Storage

Urine specimens may be stored at 2-8°C for up to 48 hours prior to testing. For prolonged storage, specimens may be frozen and stored below -20°C. Frozen specimens should be thawed and mixed well before testing.

## MATERIALS

### Materials Provided

- Integrated E-Z Split Key™ Cup with multi-drug card
- The Integrated E-Z Split Key™ Cup has a Fahrenheit temperature strip affixed to aid in the determination of specimen validity. Please use this temperature strip in conjunction with your Drug Free Policy (if applicable).
- Key
- Adulterant color chart
- Security seal
- Package insert

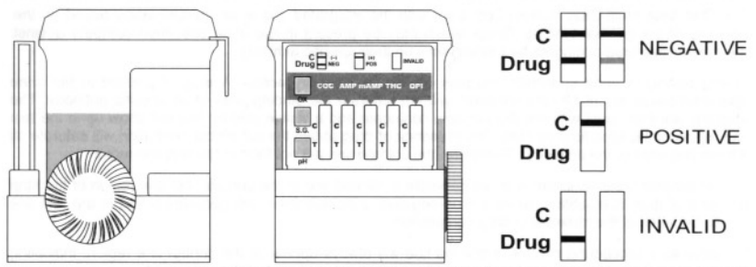
### Materials Required But Not Provided

- Timer
- External controls

## DIRECTIONS FOR USE

**Allow the test card, urine specimen, and/or controls to equilibrate to room temperature (15-30°C) prior to testing.**

1. Bring the pouch to room temperature before opening it. Remove the cup from the sealed pouch and use it as soon as possible.
2. Donor provides specimen and secures the cap by pressing down on all three corners.
3. Technician checks cap for tight seal. Technician dates and initials the security seal and attaches the security seal over the cup cap.
4. On a flat surface, technician pushes key to a fully closed position.
5. Peel off the label on the multi-drug test card to view results. The test is read in the reaction well.
6. The adulteration strip should be read between 2-5 minutes. Compare the colors on the adulteration strip to the color chart. If the results indicate adulteration, do not read the drug test results.
7. If results do not indicate adulteration, read the drug test result at 5 minutes. The drug test results remain stable for up to sixty minutes. See the illustration below. For detailed operation instructions, please refer to the Procedure Card and Color Chart.




## INTERPRETATION OF RESULTS

(Please refer to the illustration above)

**NEGATIVE:* Two lines appear**. One red line should be in the control region (C), and another apparent red or pink line adjacent should be in the test region (Drug/T). This negative result indicates that the drug concentration is below the detectable level.

***NOTE**: The shade of red in the test line region (Drug/T) will vary, but it should be considered negative whenever there is even a faint pink line.

**POSITIVE: One red line appears in the control region (C). No line appears in the test region (Drug/T).** This positive result indicates that the drug concentration is above the detectable level.

**INVALID: Control line fails to appear.** Insufficient specimen volume or incorrect procedural techniques are the most likely reasons for control line failure. Review the procedure and repeat the test using a new test panel. If the problem persists, discontinue using the lot immediately and contact your manufacturer.

## ADULTERANT INTERPRETATION

(Please refer to the color chart)

**pH:** Tests for the presence of acidic and alkaline adulterants. Normal urine pH ranges from 4.0 to 9.0. Values below pH 4.0 or above pH 9.0 are indicative of adulteration.

**Specific Gravity:** Tests for sample dilution. Normal levels for specific gravity will range from 1.003-1.030. Specific gravity levels of less than 1.003 or higher than 1.030 are an indication of adulteration.

**Oxidants:** Tests for the presence of oxidants, such as bleach and peroxide, in the urine. Oxidants, when present in the urine, will produce a blue or green color.

## QUALITY CONTROL

A procedural control is included in the test. A red line appearing in the control region (C) is considered an internal procedural control. It confirms sufficient specimen volume, adequate membrane wicking and correct procedural technique.

Control standards are not supplied with this kit. However, it is recommended that positive and negative controls be tested as good laboratory practice to confirm the test procedure and to verify proper test performance.

## LIMITATIONS

1. The One Step Multi Drug Screen Test Card with the integrated cup provides only a qualitative, preliminary analytical result. A secondary analytical method must be used to obtain a confirmed result. Gas chromatography/mass spectrometry (GC/MS) is the preferred confirmatory method. [3,4,7]
2. There is a possibility that technical or procedural errors, as well as other interfering substances in the urine specimen may cause erroneous results.
3. A Positive result does not indicate level or intoxication, administration route or concentration in urine.
4. A Negative result may not necessarily indicate drug-free urine. Negative results can be obtained when drug is present but below the cut-off level of the test.
5. Test does not distinguish between drugs of abuse and certain medications.
6. A positive test result may be obtained from certain foods or food supplements.

## ADULTERATION LIMITATIONS

1. The adulteration tests included with this product are meant to aid in the determination of abnormal specimens. While comprehensive, these tests are not meant to be an "all-inclusive" representation of possible adulterants.
2. Oxidants – The presence of high levels of antioxidants in the specimen, such as ascorbic acid, may result in false negative results for the oxidant pad.
3. Specific Gravity – Elevated levels of protein in urine may cause specific gravity values to be higher.

## PERFORMANCE CHARACTERISTICS

### Accuracy

A side-by-side comparison was conducted using the One Step Single Drug Test Strip and commercially available drug rapid tests. Testing was performed on approximately 300 specimens per drug type previously collected from subjects presenting for Drug Screen Testing. Presumptive positive results were confirmed by GC/MS. The following compounds were quantified by GC/MS and contributed to the total amount of drugs found in presumptive positive urine samples tested.

| Test | Compounds Contributed to the Totals of GC/MS |
|---|---|
| AMP | Amphetamine |
| BAR | Secobarbital, Butalbital, Phenobarbital, Pentobarbital |
| BZO | Oxazepam, Nordiazepam, a-OH-Alprazolam, Desalkylflurazepam |
| COC | Benzoylecgonine |
| THC | 11-nor-$\Delta^9$-tetrahydrocannabinol-9-carboxylic acid |
| MTD | Methadone |
| mAMP | Methamphetamine |
| MDMA | D,L Methylenedioxyamphetamine |
| OPI | Morphine, Codeine |
| PCP | Phencyclidine |
| TCA | Nortriptyline |

The following results are tabulated from these clinical studies:

**%Agreement with Commercial Kit**

| | AMP | BAR | BZO | COC | THC | MTD |
|---|---|---|---|---|---|---|
| Positive Agreement | 97% | >99% | 90% | 95% | 98% | 99% |
| Negative Agreement | 100% | >99% | 97% | >99% | 100% | >99% |
| Total Results | 98% | 99% | 94% | 98% | 99% | >99% |

| | mAMP | MDMA | MOP | OPI | PCP | TCA* |
|---|---|---|---|---|---|---|
| Positive Agreement | 98% | 100% | 100% | >99% | 98% | 95% |
| Negative Agreement | 100% | 99% | 100% | >99% | 100% | >99% |
| Total Results | 99% | 99% | 100% | >99% | 99% | 99% |

**%Agreement with GC/MS**

| | AMP | BAR | BZO | COC | THC | MTD |
|---|---|---|---|---|---|---|
| Positive Agreement | 97% | >99% | 96% | 96% | 97% | 99% |
| Negative Agreement | 95% | >99% | 96% | >90% | 88% | >94% |
| Total Results | 96% | 99% | 96% | 93% | 91% | >96% |

| | mAMP | MDMA | MOP | OPI | PCP | TCA* |
|---|---|---|---|---|---|---|
| Positive Agreement | 99% | 96% | 100% | >99% | 100% | >99% |
| Negative Agreement | 94% | 98% | 94% | >90% | 97% | 89% |
| Total Results | 96% | 97% | 97% | >95% | 98% | 91% |

Forty (40) clinical samples for each drug were run using each of The One Step Single Drug Test Strip by an untrained operator at a Professional Point of Care site. Based on GC/MS data, the operator obtained statistically similar Positive Agreement, Negative Agreement and Overall Agreement rates as trained laboratory personnel.

*Note: TCA was based on HPLC data.

### Precision

A study was conducted at three physician offices by untrained operators using three different lots of product to demonstrate the within run, between run and between operator precision. An identical panel of coded specimens, containing drugs at the concentration of ± 50% and ± 25% cut-off level, was labeled, blinded and tested at each site. The results are given below:

**AMPHETAMINE (AMP)**

| Amphetamine conc. (ng/mL) | n per site | Site A | | Site B | | Site C | |
|---|---|---|---|---|---|---|---|
| | | - | + | - | + | - | + |
| 0 | 5 | 5 | 0 | 5 | 0 | 5 | 0 |
| 500 | 5 | 5 | 0 | 4 | 1 | 5 | 0 |
| 750 | 5 | 5 | 0 | 1 | 4 | 1 | 4 |
| 1,250 | 5 | 0 | 5 | 0 | 5 | 0 | 5 |
| 1,500 | 5 | 0 | 5 | 0 | 5 | 0 | 5 |

**BARBITURATES (BAR)**

| Secobarbital conc. (ng/mL) | n per site | Site A | | Site B | | Site C | |
|---|---|---|---|---|---|---|---|
| | | - | + | - | + | - | + |
| 0 | 5 | 5 | 0 | 5 | 0 | 5 | 0 |
| 150 | 5 | 4 | 1 | 5 | 0 | 5 | 0 |
| 225 | 5 | 1 | 4 | 4 | 1 | 5 | 0 |
| 375 | 5 | 0 | 5 | 0 | 5 | 2 | 3 |
| 450 | 5 | 0 | 5 | 0 | 5 | 1 | 4 |

**BENZODIAZEPINES (BZO)**

| Oxazepam conc. (ng/mL) | n per site | Site A | | Site B | | Site C | |
|---|---|---|---|---|---|---|---|
| | | - | + | - | + | - | + |
| 0 | 5 | 5 | 0 | 5 | 0 | 5 | 0 |
| 150 | 5 | 4 | 1 | 3 | 2 | 4 | 1 |