

Drug	False Positives (Meds/Supplements/Foods)	False Negatives (Reasons)
Dextromethorphan (DXM)	Quinine, Diphenhydramine	Rapid metabolism, Low dose below cutoff
Alcohol (ETG)	Mouthwash, Hand sanitizers, Fermented foods	Diluted urine, Time lapse >80 hours, Small alcohol intake
THC	Ibuprofen, Naproxen, Hemp seed oil	Synthetic cannabinoids instead, Single use detected only
Adulterations	Unknown	Oxidizing agents, Bleach, Vinegar, Commercial
Amphetamines	Pseudoephedrine, Ranitidine, Bupropion, Adderall (legit)	Short detection window, Rapid metabolism, Designer
Barbiturates	Ibuprofen, Naproxen	Short-acting barbiturates missed, Low concentration
Benzodiazepines	Sertraline, Oxaprozin	Lorazepam, Clonazepam often missed on immunoassay,
Buprenorphine	Other opioids	Low dose, Some tests insensitive, Metabolite-only use
Clonazepam	Diazepam metabolites	Poor immunoassay sensitivity, Rapid clearance
Cocaine	Topical anesthetics with cocaine derivatives	Short detection window (1-2 days), Diluted samples
Fentanyl	None commonly reported	Not detected by standard opiate screens, Low-dose patch
Flakka	No common cross-reactives	Novel analogues not detected, Short detection window
Gabapentin	No major cross-reactives	Often not included in standard panels
Hydrocodone	Other opioids	Cross-reactivity limits, Short detection
Heroin	Poppy seeds, Codeine	Metabolizes to morphine—missed if cutoff high
K2 Spice (synthetic marijuana)	No common cross-reactives	Most standard THC tests do not detect synthetics
Kratom	No common cross-reactives	Not detected on routine panels
LSD	Antihistamines, Tricyclic antidepressants	Very short detection window (24h), Low concentration
Methadone	Diphenhydramine, Quetiapine	Missed if testing only for opiates, Dilution
MDPV (bath salts)	No common cross-reactives	Not detected on routine panels
Methamphetamine	Pseudoephedrine, Selegiline, Bupropion	Dilution, Some designer forms missed
Nicotine	No major cross-reactives	Short detection window, Low cutoff sensitivity
Opiates	Poppy seeds, Quinolone antibiotics, Rifampin	Synthetic/semi-synthetic opioids missed (oxycodone,
Oxycodone	Other opioids	Not picked up on generic opiate screens, Low dose
MDMA (ecstasy)	Pseudoephedrine, Bupropion	Adulterated pills may contain no MDMA, Short detection
PCP	Dextromethorphan, Diphenhydramine, Venlafaxine, Tramadol	Short detection, Low cutoff sensitivity
PPX (Propoxyphene)	Other opioids	Rarely tested, Short detection window
Psilocybin	No common cross-reactives	Metabolizes rapidly, Not included in most panels
Ritalin	No common cross-reactives	Not detected by amphetamine tests, Short half-life
TCA	Cyclobenzaprine, Carbamazepine	Low dose, Cross-reactivity varies by assay
Tianeptine Zaza	No established false positives	Not detected on routine panels
Tramadol	Venlafaxine, Dextromethorphan	Often not included in standard opiate screen
Zylazine	No established false positives	Rarely included in panels
a-PVP	No common cross-reactives	Novel analogues missed
DELTA8	CBD oil, Hemp products	Not reliably detected on THC immunoassays
Notes		
Legend / Footnote:		
This combined table lists common drugs of abuse with both false positives		
- Column "Drug": The substance targeted by the drug test.		
- Column "False Positives": Medications, supplements, or foods that may		
- Column "False Negatives": Reasons why the substance might NOT be		
Notes:		

1. False positives = cross-reactivity, other substances mimicking the target.		
2. False negatives = rapid metabolism, low dose, dilution, short detection		
3. Not all panels test for all drugs (e.g., Kratom, Spice, bath salts).		
4. Confirmatory testing (GC-MS/LC-MS) is recommended for accuracy.		