

Comprehensive Urine Element Profile

24 hour Report



63 Zillicoa Street
Asheville, NC 28801
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Patient: **SAMPLE PATIENT**

Age:
Sex:
MRN:

Toxic Elements		
Element	Reference Range	Reference Range
Lead	0.5	<= 1.5
Mercury	1.17	<= 2.17
Aluminum	1.6	<= 25.2
Antimony	0.016	<= 0.144
Arsenic	0	<= 49
Barium	0.1	<= 5.5
Bismuth	0.26	<= 0.70
Cadmium	0.06	<= 0.63
Cesium	0.0	<= 10.1
Gadolinium		1.117 <= 0.019
Gallium		0.562 <= 0.031
Nickel	0.61	<= 4.41
Niobium		0.112 <= 0.086
Platinum		0.106 <= 0.038
Rubidium	0	<= 2,486
Thallium	0.181	<= 0.273
Thorium	0.113	<= 0.108
Tin	1.06	<= 2.25
Tungsten	0.128	<= 0.264
Uranium		0.063 <= 0.027

Nutrient Elements		
Element	Reference Range	Reference Range
Chromium		11.7 0.6-10.7
Cobalt		3.00 0.01-3.56
Copper		14.5 3.6-15.5
Iron	9	5-76
Lithium		160 8-89
Manganese		1.66 0.03-1.83
Molybdenum		142 14-218
Selenium	5	24-273
Strontium	1	46-389
Vanadium		0.9 0.1-3.3
Zinc	65	51-857

Results in mg/24 hours		
Element	Reference Range	Reference Range
Calcium		412 35-406
Magnesium	108	45-275
Potassium	2,912	686-4,568
Sulfur	812	353-1,567

Creatinine Concentration		
Urine Creatinine	136.00	38.00-200.00 mg/dL

Creatinine Concentration	
Urine Total Volume (in milliliters):	1,200
Length of Collection:	24.0
Provocation Comment:	Information regarding provocation was not provided.

WHEN READY TO SHIP, ENSURE THE FOLLOWING:

All tubes are:

- Tightly closed
- Marked with **first and last name, gender, collection date, and total urine volume in milliliters (ml)**
- Sealed in biohazard bag with absorbent pad
- All sections of **requisition form completed**.
- Payment included** or completed online.
- All specimens** placed back in original box.

SHIP THE SPECIMEN(S) TO THE LAB

Please refer to the shipping instruction insert found in your sample collection pack.

VISIT YOUR PATIENT RESOURCE CENTER AT WWW.GDX.NET/PRC

- Access test results
- Make payments
- Complete health surveys



Call **800.522.4762** or visit our website at www.gdx.net

Comprehensive Urine Elements NUTRITIONAL

PATIENT URINE COLLECTION INSTRUCTIONS FOR THE FOLLOWING PROFILE(S)

Comprehensive Urine Elements Profile*	Urine	#3527
Toxic Element Clearance Profile*	Urine	#3529

COLLECTION MATERIALS FOR SPECIMEN



ADDITIONAL MATERIALS

- Disposable vinyl glove
- Test requisition form
- Biohazard bags with side pocket with absorbent pads (3)
- Specimen collection pack
- FedEx® Clinical Lab Pak and Billable Stamp

If any items are missing or expired, or liquid is spilled, call Client Services at 800.522.4762 and press "1"

IMPORTANT PREP BEFORE PATIENT TAKES TEST

For full details and explanations refer to: www.gdx.net/tests/prep

- Female patients should not collect urine during a menstrual period.
- **2 Days before the test discontinue all of the following (unless instructed otherwise by your physician):**
 - » Supplements containing creatinine, vitamin C or any mineral elements measured on this test
 - » Other substances that may influence urinary element excretion of elements
 - » Seafood (unless asked to continue by your healthcare provider)
 - » Continue with the above food restrictions until your sample is completely collected



1 Completely fill out front and back of test requisition form. Failure to provide all information will result in delay of test processing.

2 Check your Requisition to determine if this is a "Random/Timed" collection or a "24-Hour" collection.

3 **FOR 24-HOUR COLLECTION:** Skip the first urination after arising on the first day of the test. Collect all subsequent urinations for the next 24 hours, including your first urination of the next day. Refrigerate jug through 24 hour collection period.

FOR RANDOM/TIMED COLLECTION: Collect all urinations for the period specified by your healthcare provider. Minimum volume of urine must be 120 ml or 4 oz. Refrigerate jug through collection period.

4 Using the cup, collect each urination and pour into the large jug. Do not rinse the cup with tap water or clean the cup with cloth or paper. Keep the lid on the cup between urinations. Recap jug.



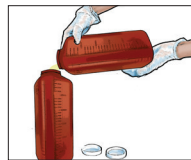
5 Preparing the Sample

IF YOU ONLY USED ONE JUG:

Set the jug on a level surface and note the total volume using the milliliter marks on the jug. Write the amount of urine on the Requisition in the space labeled Total Urine Volume. After tightening the lid, invert the orange collection jug repeatedly for 30 seconds to mix contents.

IF YOU USED TWO JUGS:

Put on the disposable gloves and mix the urine together by pouring back and forth between the jugs. When thoroughly mixed, note the volume of each jug using the milliliter marks on the jugs. Add these amounts, then write the total amount of urine on the Requisition in the space labeled Total Urine Volume.



Select either jug for step #6.



6 Use the pipette to transfer urine to fill both tubes. Cap the tubes securely. Discard the remaining urine, the large collection jug(s), gloves, and other kit components.



7 Write patient's first and last name, gender, date of collection and total urine volume in milliliters (ml) on both tubes. Place the tubes in the Biohazard bag. Refrigerate until ready to ship.

8 Complete the Requisition form, including "Total Volume" and "Date of Collection".

