**24 HOUR URINE COLLECTION INSTRUCTIONS**

MEMORIAL HOSPITAL LAB

TEST NAME

PATIENT NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DOB: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PERSERVATIVE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PT Height: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PT Weight: \_\_\_\_\_\_\_\_\_\_\_\_\_ Total Vol: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Note for Creatinine Clearance:

1. Withhold from coffee or tea on the days of the urine test.
2. Drink water before and during the test to provide hydration throughout the test.
3. A blood sample must be done during or within 12 hours of urine collection.

Instructions:

1. Discard your first urine sample before starting 24 hour urine collection.
2. Record the exact start date and time of collection.
3. Refrigerate the specimen during collection OR keep in a cooler filled with ice.

\*\*\*\*EXCEPTION: Collection for Uric Acid should remain at room temperature\*\*\*\*\*

 Start Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Start Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \*\*\*\*THIS THE BEGINNING OF THE 24 HOUR COLLECTION\*\*\*\*

1. Collect all the urine voided during the day and night until precisely the same time the following day (24 HRS).

End Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ End Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*\*\*\*THIS IS THE END OF THE 24 HOUR COLLECTION\*\*\*\*

1. Deliver to the Laboratory as soon as possible after the 24hr collection is complete.

Contact the Laboratory at **618-257-5427** for hours of operation.

\*\*\*\* **A BLOOD DRAW MAY BE REQUIRED DURING COLLECTION\*\*\*\***