

## **CREATININE CLEARANCE COLLECTION & SHIPPING INSTRUCTIONS**

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### **24-Hour Urine**

- 1 - Urine Collection Cup (Females only)
- 1 - Orange Urine Jug
- 2 - 30 mL Urine Vials

### **Serum**

- 1 - SST
- 1 - Transfer Tube

**CAREFULLY READ COLLECTION AND SHIPPING INSTRUCTIONS THOROUGHLY BEFORE STARTING.**

UPON RECEIPT – REMOVE LIDS FROM STYROFOAM CONTAINERS AND PLACE INTO THE FREEZER – DO NOT REMOVE THE ICE PACKS. KEEP VIALS ON TOP OF ICE PACK WHEN FREEZING. REMOVE THEM WHEN NEEDED FOR COMPLETION OF TEST.

**PLEASE NOTE:** When shipping the specimens back to the lab, send Monday through Thursday Only. **DO NOT SHIP ON FRIDAYS AS DELIVERIES ARE NOT ACCEPTED ON SATURDAY OR SUNDAY.**

**OBSERVED HOLIDAYS ARE AS FOLLOWS: NEW YEARS DAY, MEMORIAL DAY, FOURTH OF JULY, LABOR DAY, THANKSGIVING DAY AND THE DAY AFTER, AND CHRISTMAS DAY.**

**DO NOT SEND SAMPLE(S) THE DAY PRIOR TO OR THE DAY OF A HOLIDAY.**

### **INTERFERING SUBSTANCES**

**LIMIT VITAMIN C INTAKE TO 1500 MILLIGRAMS** the day before and the day of the test.

**LIMIT FLUID INTAKE TO 2 LITERS OR APPROXIMATELY 68 OZ.** This includes all liquids: water, tea, soda, coffee, juice, etc.

Notify practitioner of all medications and supplements currently in use as some supplements affect hormone levels.

### **COLLECTION INSTRUCTIONS**

**SERUM MUST BE COLLECTED WITHIN ONE HOUR OF THE FIRST 24-HOUR URINE COLLECTION.**

**BEGIN COLLECTION AT ANY TIME OF THE DAY THAT IS CONVENIENT**

1. To begin the test, empty bladder and **DISCARD** urine. Write down the time. The test has now started. *For example: If beginning the test at 8 am Monday, write down Date (month/day/year) (time).*
2. After the first discarded specimen, use the plastic collection container provided to collect **ALL** urine for the next 24 hours. (**FEMALE PATIENTS:** Urinate into the collection cup and pour the urine into the orange collection container immediately after urinating.) The container must be kept refrigerated for the entire collection period.
3. **IF AT ANY TIME DURING THE 24-HOUR URINE COLLECTION PERIOD A SAMPLE IS ACCIDENTALLY DISCARDED, THE COLLECTION PROCEDURE MUST BE REPEATED FROM THE BEGINNING.** Discard all urine collected up to this point, rinse, air dry, and reuse the same container.

4. If the container will not accommodate all the collected urine, another clean, **PLASTIC** container may be used, such as an empty gallon water container, or another container may be acquired from the doctor's office. **Do Not USE GLASS OR METAL CONTAINERS TO COLLECT URINE.**
5. Complete the attached Questionnaire and the enclosed Requisition Form; include payment (if required).

#### **To END THE COLLECTION**

6. At exactly the same time the next day, empty bladder and add this to the collection container. For example, if the test began at 8 am Monday, the test should be completed at **exactly** 8 am Tuesday.

#### **IF DELIVERING THE CONTAINER(S) TO MERIDIAN VALLEY LAB**

7. If delivering the container(s) to Meridian Valley Lab, specimen needs to be received within 24-hours of the last collection time. **The collection is now complete.**

#### **IF SHIPPING THE URINE TO MERIDIAN VALLEY LAB, CONTINUE WITH THE INSTRUCTIONS BELOW**

8. Ensure the lid is tightly secured to the collection container. Mix the 24-hour urine sample by inverting the container several times. **If more than one jug was used, skip to step 12.**
9. Stand the collection container on the small square end. Measure the total volume of urine collected in the container by using the scale on the container itself (scale denotes milliliters (mL)). Record the total volume on the vial labels and requisition.
10. Pour the urine into the plastic vials up to the 30 mL mark. Tightly secure lids. Write patient's name and date of collection on the labels. (If not shipping within 24 hours of collection, the vials can either be frozen or refrigerated until ready to ship. Refrigerated specimens must ship within 72 hours of collection. Frozen specimens must be shipped within one month). **Skip to shipping instructions.**
11. If the total volume of urine fills more than one container, pour the urine back and forth between the containers two to three times to completely mix all urine together. Use an additional clean plastic container if needed.
12. Pour urine back into the orange container up to the top line. Stand the collection jug on the small square end. Measure the total volume of urine collected in the container by using the lines on the scale (lines denote milliliters (mL)). Note this volume.
13. Pour the urine into the plastic vials up to the 30 mL mark. Tightly secure lids.
14. Discard urine leftover in orange container. Pour the remainder of the urine from the 2<sup>nd</sup> container into the orange container. Measure the volume of the urine. Add this volume to the first noted volume.
15. Write patient's name and date of collection on the vial labels and requisitions. **Record ONE total volume on the labels and requisitions.** (If not shipping within 24 hours of collection, the vials can either be frozen or refrigerated until ready to ship. Refrigerated specimens must ship within 72 hours of collection. Frozen specimens must be shipped within one month).

#### **SERUM COLLECTION INSTRUCTIONS**

1. Draw one SST tube.

2. Allow at least 15 minutes for blood to clot.
3. Pour the separated serum into the transfer tube.
4. Label the transfer tube with patient's name and date collected.

#### **SHIPPING INSTRUCTIONS**

1. Remove icepack and styrofoam container from freezer.
2. Place urine vials in the zippered portion of the biohazard bag. Seal bag.
3. Place serum vials in the zippered portion of the second biohazard bag. Seal bag.
4. Place the Requisition and Questionnaire in the outside pocket of the biohazard bag containing the urine specimen. Include payment if required.
5. Place biohazard bags next to the frozen ice packs in the styrofoam containers.
6. Place the styrofoam containers in cardboard shipping boxes.
7. Place the cardboard boxes in the UPS next day air pack and securely seal.
8. Place return shipping label with barcode on the outside UPS next day air bag.
9. Save return receipt with the tracking number for your records.
10. Send specimens Monday through Thursday only.
11. Call UPS toll free at **1.800.742.5877** for a pickup or for the nearest drop location. UPS will only pick up on weekdays.
12. When calling for UPS pickup, request "**ON CALL AIR**" only. **Do NOT request a one-time pickup.** Meridian Valley Lab pays for "**ON CALL AIR**" only. UPS expects the patient to pay for a one-time pickup

