



CLINICAL PATHOLOGY LABORATORIES

A Sonic Healthcare Clinical Laboratory

24-Hour Urine Collection Instructions

Patient's Name: _____ Date of Birth: _____

Physician's Name: _____

Supplies

1. Light-Proof, 24-Hour Urine Collection Container(s).

Important Notes

1. Submit this form along with your laboratory order form when you return your 24-hour urine specimen to a CPL location.
2. The 24-hour urine collection container(s) must be refrigerated/kept cold at all times during the 24-hour urine collection timeframe.
3. Do not place the container in an area with bright light or in direct sunlight.
4. Some tests that require 24-hour urine specimens also require a blood specimen, which must be collected when the 24-hour urine specimen is returned to a CPL location.

Procedure

To obtain an accurate laboratory test of a 24-hour urine sample, please follow the instructions below:

1. Ask your physician if there are any special instructions prior to beginning the collection. Special instructions such as dietary changes, sometimes apply depending on the test(s) ordered.
2. Empty your bladder when you first get up in the morning. This first morning void is NOT to be collected, however you must record the date and time of this void, as this is when your 24-hour time frame begins.
Date of First Void: _____ Time of First Void: _____
3. From this point forward, and for the next 24 hours, you will collect all urine into the 24-hour urine collection container(s).
4. Your final collection will be when you empty your bladder the next morning at the same hour as you recorded in step 2 above.
Date of First Void: _____ Time of First Void: _____

If you have any questions during your collection, please call CPL Customer Service at 512-873-1600.

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