

Kidney Stone Analysis

Order Name: **KIDST**  
Revision Date: 10/21/2019

TEST NAME		METHODOLOGY		LOINC CODE
Kidney Stone Analysis				
SPECIMEN REQUIREMENTS				
Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment
Preferred	mL ( mL)	Stone	Screw-capped Sterile Container	Room Temperature
Instructions	Label specimen with Mobilab label or with patient name (first and last), date of birth, date and time of collection, collector initials, and test(s) being ordered.			
Reference Range	A quantitative report will be provided after analysis.			
Methodology	Infrared Spectrum Analysis			
GENERAL INFORMATION				
Testing Schedule	Monday-Friday; 8 a.m.-8 p.m			
Expected TAT	3 Days			
CPT Code(s)	82365			
Lab Section	NRLS-Mayo Medical Laboratories			