

Sodium, Random, Urine

Order Name: **URNA**
Revision Date: 01/12/2013

TEST NAME	METHODOLOGY	LOINC CODE
Sodium, Random, Urine		

SPECIMEN REQUIREMENTS				
Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment
Instructions	7 mL (minimum volume: 0.5 mL) from a random urine collection in a clean, dry, screw-capped container. No preservative. Send specimen refrigerated. Note: Label specimen with patient name (first and last) or other unique identifier, patient hospital identification number or Social Security number, date and time of collection, collector initials, and test(s) being ordered.			

GENERAL INFORMATION	
Testing Schedule	Monday through Sunday TAT: 2 hours
CPT Code(s)	84300
Lab Section	NRLS-Core Chemistry