

24 h urine collections in patients with nephrolithiasis, nephrocalcinosis or hematuria

Background

- One urine collection does not enough to depict the true lithogenic risk factors
- Patients tend to behave at such urine collections „ideal typical“
 - o E.g. drink more than they normally do
- Influence of dietary factors on urine results is not completely excludable
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Our Procedure

- Urine collection on three (following) days at home
 - o 1. day: normal diet, fluid intake as always
 - o 2. day: low oxalate diet, fluid intake as always
 - o 3. Day: high oxalate diet (e.g. spinach or rhubarb), fluid intake as always
- Urine preservation with 5 % Thymol in Isopropanol or 2 N HCL, 10 ml per liter of urine collected
 - Please send 10 ml Aliquot to the Wisplinghoff lab
 - Please do not forget Address of payee
 - Lab request sheet attached
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- Family screening should always be performed, when index case shows lithogenic risk profile

Be aware: many patients change their dietary habits and fluid intake at time of urine collection. Especially, a diet low in calcium is obsolete! No urine collection at time of infusion therapy.