

Test Name	Laboratory	Specimen Type	Test Schedule	Reference Range	Effective Date	Comments
UIBC (see <u>Transferrin Saturation, Unsaturated Iron Binding Capacity</u>)						
Umbilical Cord Blood Testing (see <u>Cord Blood Testing</u>)						
Unsaturated Iron Binding Capacity Iron Binding Capacity Saturation UIBC TIBC Iron Overload	Core	4.5 mL Green (Lithium Heparin) top Vacutainer tube GENERAL LABORATORY REQUISITION	As required	24.2 - 70.1 mol/L	2008-11-15	UIBC is part of the Iron Overload screen and cannot be ordered as a separate test

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Uranium,Urine	Trace Elements	24 hour urine collected in an unused 24 hour urine container or random urine TRACE ELEMENTS REQUISITION	Batched analysis	<u>SI Units:</u> Random Urine: 0-0.042 nmol/L nmol/mol creatinineAgeFe maleMale0-110-5.00-4.812-190-3.00-3.020-290-3.40-2.630-390-4.20-3.140-490-4.90-3.250-590-5.80-3.760-690-5.80-3.970-790-6.00-4.2≥800-7.40-4.8 24 Hour Urine: 0-0.063 nmol/d <u>Conventional Units:</u> Random Urine: 0-0.010 µg/L ng/g creatini (more...)		Reference Ranges are based on Non-Occupationally exposed population. Find Interpretive Comment and Clinical Information here:

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Urate, 24-Hour Urine Uric Acid	Core	24 Hour urine GENERAL LABORATORY REQUISITION	Weekdays	1.5-4.5 mmol/d		
Urate, Plasma Uric Acid	Core	4.5 mL Green top Vacutainer tube Pediatric: 0-2 years: 0.5 mL Green top Microtainer 2-10 years: 3 mL Green top tube GENERAL LABORATORY REQUISITION	As required	Premature: <32 µmol/L 0-1 month: <311 µmol/L 1 month-1 year: <372 µmol/L 1 year-17 years: <362 µmol/L Males >18 years: <420 µmol/L Females >18 years: <340 µmol/L	2008-11-15	
Urate, Urine-Random Uric Acid	Core	Random urine GENERAL LABORATORY REQUISITION	As required	0.00-0.30 mmol/L	2006-03-01	
Urea Cycle Disorder (see <u>Orotic Acid, Urine</u>)						
Urea, 24-Hour Urine	Core	24 Hour urine GENERAL LABORATORY REQUISITION	Weekdays	170-580 mmol/24 hours	2008-11-16	

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Urea,Fluid	Core	Fluid GENERAL LABORATORY REQUISITION	As required	See report	2010-05-17	
Urea,Plasma Blood Urea	Core	4.5 mL Green top Vacutainer Pediatric: 0-2 years: 0.5 mL Green top Microtainer 2-10 years: 3 mL Green top tube GENERAL LABORATORY REQUISITION	As required	Premature: <2.7 mmol/L 0-5 months: <7.0 mmol/L 6 months-17 years: <8.0 mmol/L 18 years-65 years: <8.3 mmol/L >65 years: <11.9 mmol/L	2008-11-15	
Urea,Urine-Random	Core	Random urine GENERAL LABORATORY REQUISITION	As required	141-494 mmol/L (1st morning void)	2008-11-16	
Ureaplasma/Mycoplasma Culture (see <u>Mycoplasma/Ureaplasma Culture</u>)						
Uric Acid (see <u>Urate, 24-Hour Urine, Urate,Plasma, Urate,Urine-Random</u>)						

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Urinalysis Routine R&M Routine and Microscopic	Core	Random urine GENERAL LABORATORY REQUISITION	As required	Leucocytes, urine: 0 cells/uL Specific Gravity, urine: 1.003-1.029 pH, Urine: 4.5-7.5 Protein, Urine: 0.0-0.2 g/L Glucose, Urine: 0.0-5.5 mmol/L Ketones, Urine: 0.0-0.5 mmol/L Blood, Urine: Negative Nitrite, Urine: Negative	2009-12-21	

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Urinary Fluid for Cytology Urine for Cytology	Cytopathology-UH	<p>Non-Gynaecologica I: Urinary</p> <p>Orange top routine specimen container containing 30 mL Cytolyt solution/60 mL body fluid</p> <p>CYTOPATHOLOGY REQUISITION-NON-GYNAECOLOGICAL AREA</p>	Weekdays		2010-11-25	<p>Close specimen lid tightly to prevent leakage.</p> <p>Cytopathology Laboratory Room A3-242 UH (519) 685-8500 x 36391/36392</p> <p>Clinical history is an important component for diagnostic interpretation. The specimen is Thinprep processed so the total specimen volume should not exceed one orange top specimen container with Cytolyt included.</p>

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Urine Culture (Urine C & S)	Microbiology (VH)	Urine OR Urine collected in the O.R.(Cytoscopy , kidney nephrostomy, suprapubic aspirate) MICROBIOLOGY REQUISITION	Daily			In/Out Catheter and O.R. Urines are processed using a 10 L inoculum which is reflected in the colony count.
Urine for Cytology (see <u>Urinary Fluid for Cytology</u>)						
Urine Microalbumin (see <u>Microalbumin,Urine</u>)						
Urine Oxycodone Percocet Percodan Oxycontin	Toxicology/Special Chemistry	Minimum of 10 mL of random urine collected in a sterile container. GENERAL LABORATORY REQUISITION	Monday-Friday: 0800-1600			
Urine Protein Electrophoresis (see <u>Protein Electrophoresis, Urine</u>)						
Uroporphyrin III (see <u>Porphyrin Screen and Quantitation, 24-Hour Urine, Porphyrin Screen and Quantitation, Feces, Porphyrin Screen and Quantitation, Random Urine</u>)						