

Items Included in Your Collection Kit

- 1 – Kit Box
- 1 – Test Request Form (TRF)
- 1 – Urine Specimen Cup
- 1 – Zip Closure Specimen Bag
- 1 – Absorbent Pad
- 1 – FedEx Shipper Bag

URINE COLLECTION



If you are missing any of the needed components or have questions about the collection, please call Diagnostic Solutions Laboratory Customer Service Department at 877-485-5336.

The assays in the OAp - Organic Acids Profile™ were developed, and/or the performance characteristics determined, by Diagnostic Solutions Laboratory.



ORGANIC ACIDS PROFILE

SHIPPING INSTRUCTIONS

IMPORTANT: If you cannot ship the specimen on the day of collection, please freeze and ship as soon as possible, preferably within 3 days.



ANALYZE YOUR METABOLIC PATHWAYS

ADVANCED ORGANIC ACIDS ASSESSMENT

Call FedEx at 1-800-463-3339 to Schedule Your Free Pickup

1. When the automated greeting begins say, “Schedule a pickup.”
2. When asked if your label has the word “stamp” on it, say, “Yes.”
3. Your tracking number can be found on the Return Label.

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OAP - ORGANIC ACIDS PROFILE™ | URINE SAMPLE COLLECTION INSTRUCTIONS | R2-06262024 | US

URINE COLLECTION INSTRUCTIONS

– FOLLOW INSTRUCTIONS CAREFULLY –
IMPROPER COLLECTION MAY INVALIDATE RESULTS
OR RESULT IN A REJECTED SAMPLE

NOTE: Please review all instructions and collection kit components before starting your sample collection. **DO NOT** discontinue taking prescription medications unless directed by your physician.

Additional instructions for filling out the Test Request Form can be found at:
www.diagnosticsolutionslab.com/patients/test-request-form-overview

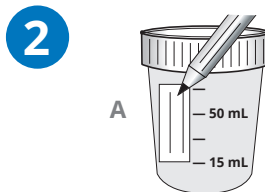


Avoid consuming fruits, jams, and jellies for 48 hours prior to collecting your sample. Please speak with your healthcare provider before discontinuing nutritional supplements or medications.

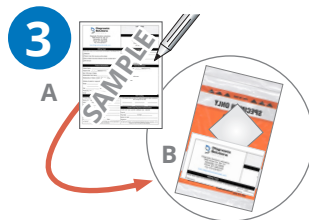


1 **A)** Prior to bed, empty your bladder and discard. **DO NOT** collect this urine specimen.

B) The sample you will collect is a first morning urine. **Ensure it has been at least six (6) hours since you emptied your bladder.**

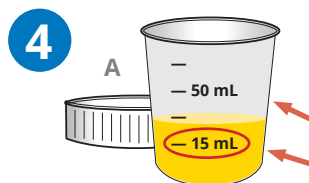


2 **A)** Write the patient name, date of birth, and date of collection on the specimen cup label with permanent marker pen.



3 **A)** Complete all sections of the Test Request Form, including date of collection and payment type.

B) Place completed Test Request Form into the document holder on the specimen bag.



4 **A)** Upon waking in the morning, remove the top of the specimen cup and set it aside safely for reuse, then urinate directly into the cup.

DO NOT fill the cup more than 50 mL.

ENSURE there is at least 15 mL of urine.



5 **A)** Be sure the top is properly and fully closed. Wipe any drops off the outside of the cup.

*The top is fully closed when **TWO CLICKS** are heard while closing the sample. If two clicks are not heard, open and re-close the sample until heard**

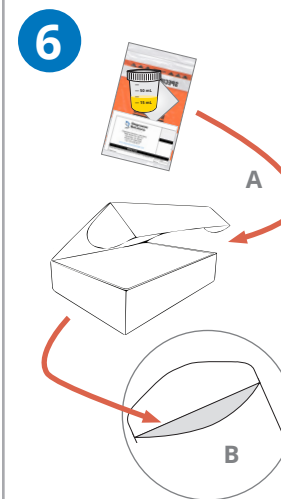
B) Place sample into zip closure specimen bag and seal carefully.

** The sample must be fully closed and sealed. Samples that have leaked in the specimen bag will be rejected upon arrival at the laboratory.*



6 **A)** Place zip closure specimen bag with all contents into the freezer.

B) Allow urine to freeze for a minimum of two (2) hours prior to shipping.



On Day of Shipping:

A) Place the frozen specimen bag (including the urine sample, and completed TRF) inside the kit box.

B) Place the kit box in the supplied FedEx shipper bag and ship to Diagnostic Solutions Laboratory for testing.

Make note of your tracking number.*

** If you cannot ship the specimen on the day of collection, keep the collected urine sample in the freezer until you are able to ship.*

See important shipping requirements and instructions on the following page.



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- 1 – Waybill
- 3 – Commercial Invoices
- 1 – Clear Pouch

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ORGANIC ACIDS PROFILE

SHIPPING INSTRUCTIONS – Canada & US Territories

IMPORTANT: If you cannot ship the specimen on the day of collection, please freeze and ship as soon as possible, preferably within 3 days.



ANALYZE YOUR METABOLIC PATHWAYS

ADVANCED ORGANIC ACIDS ASSESSMENT

1. Complete the name, address, phone number, and signature sections on the 3 commercial invoices and waybill.
2. Place the completed invoices and waybill in the clear pouch and affix pouch to the front of the clinical pak.
3. Call FedEx at 1-800-463-3339 to schedule your pickup. When the automated greeting begins say, “Schedule a pickup”
4. When asked if you are shipping a package say, “Yes.”
5. Let them know you are shipping using an International Waybill.
6. Make note of your tracking number.

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OAP - ORGANIC ACIDS PROFILE™ | URINE SAMPLE COLLECTION INSTRUCTIONS | R2-06262024 | CANADA & US TERRITORIES

URINE COLLECTION INSTRUCTIONS

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