

Reporting Title: Osmolality, U
Performing Location: Rochester

Specimen Requirements:
Supplies: Urine Tubes, 10 mL (T068)
Container/Tube: Plastic, 10-mL urine tube
Specimen Volume: 5 mL
Collection Instructions: Collect a random urine specimen

Forms:
If not ordering electronically, complete, print, and send a [Renal Diagnostics Test Request](#) (T830) with the specimen.

Specimen Type	Temperature	Time	Special Container
Urine	Refrigerated (preferred)	7 days	
	Frozen	7 days	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
UOSMU	Osmolality, U	Numeric	mOsm/kg	2695-5

LOINC® and CPT codes are provided by the performing laboratory.

Supplemental Report:
No

CPT Code Information:
83935

Reference Values:
0-11 months: 50-750 mOsm/kg
> or =12 months: 150-1,150 mOsm/kg