

**Reporting Title:** Osmolality, F**Performing Location:** Rochester**Ordering Guidance:**

This test is only clinically valid if performed on watery specimens. In the event a formed fecal specimen is submitted, the test will not be performed.

**Specimen Requirements:**

Patient Preparation: No barium, laxatives, or enemas may be used for 96 hours prior to start of, or during, collection.

Supplies: Stool containers - 24, 48, 72 Hour Kit (T291)

Container/Tube: Stool container

Specimen Volume: 10 g

Collection Instructions: Collect a very liquid stool specimen.

**Specimen Minimum Volume:**

5 g

Specimen Type	Temperature	Time	Special Container
Fecal	Frozen (preferred)	14 days	
	Refrigerated	7 days	
	Ambient	48 hours	

**Result Codes:**

Result ID	Reporting Name	Type	Unit	LOINC®
OSMOF	Osmolality, F	Numeric	mOsm/kg	2693-0

LOINC and CPT codes are provided by the performing laboratory.

**Supplemental Report:**

No

**CPT Code Information:**

84999

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**Reference Values:**

An interpretive report will be provided