

**Reporting Title:** Organic Acids Scrn, U**Performing Location:** Rochester**Necessary Information:**

1. Patient's age is required.
2. Biochemical Genetics Patient Information (T602) is recommended, but not required, to be filled out and sent with the specimen to aid in the interpretation of test results.

**Specimen Requirements:**

Supplies: Urine Tubes, 10 mL (T068)

Container/Tube: Plastic, 10-mL urine tube

Specimen Volume: 10 mL

Pediatric: If insufficient collection volume, submit as much specimen as possible in a single container; the laboratory will determine if volume is sufficient for testing.

Collection Instructions:

1. Collect a random urine specimen.
2. No preservative.

**Specimen Minimum Volume:**

4 mL

**Forms:**

1. Biochemical Genetics Patient Information (T602)
2. If not ordering electronically, complete, print, and send a Biochemical Genetics Test Request (T798) with the specimen.

Specimen Type	Temperature	Time	Special Container
Urine	Frozen (preferred)	416 days	
	Refrigerated	14 days	

**Result Codes:**

Result ID	Reporting Name	Type	Unit	LOINC®
80619	Organic Acids Scrn, U	Alphanumeric		49287-6

LOINC and CPT codes are provided by the performing laboratory.

**Supplemental Report:**

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No

**CPT Code Information:**

83919

**Reference Values:**

An interpretive report will be provided.