

**Reporting Title:** Orotic Acid, U**Performing Location:** Rochester**Necessary Information:**

1. Patient's age is required.
2. Provide a reason for testing.

**Specimen Requirements:**

Supplies: Urine Tubes, 10 mL (T068)

Container/Tube: Plastic, 10-mL urine tube

Specimen Volume: 10 mL

Collection Instructions:

1. Collect a random or timed urine specimen.
2. No preservative needed.

**Specimen Minimum Volume:**

3 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	30 days	

**Result Codes:**

Result ID	Reporting Name	Type	Unit	LOINC®
8905	Orotic Acid, U	Numeric	mmol/mol Cr	17869-9

LOINC and CPT codes are provided by the performing laboratory.

**Supplemental Report:**

No

**CPT Code Information:**

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83921

**Reference Values:**

<2 weeks: 1.4-5.3 mmol/mol creatinine  
2 weeks-1 year: 1.0-3.2 mmol/mol creatinine  
2-10 years: 0.5-3.3 mmol/mol creatinine  
> or =11 years: 0.4-1.2 mmol/mol creatinine