

VANADIUM, RANDOM, URINE
#89680

USEFUL FOR: Detecting vanadium toxicity on random urine collections.

NOTE: For 24 hour collections, continue to order #83395 Vanadium, 24 Hour, Urine.

METHODOLOGY: Inductively Coupled Plasma-Mass Spectrometry (ICP-MS)

REFERENCE VALUES: <1.0 mcg/L

SPECIMEN REQUIREMENTS: 1 mL from a random urine collection as follows:

1. Collect in a clean, plastic urine collection container(s) with no metal cap(s) or glued insert(s).
2. Pour 1 mL into a plastic, 13-mL urine tube or a clean, plastic aliquot container with no metal cap or glued insert.
3. See "Metals Analysis-Collection and Transport" in Special Instructions for complete instructions.
4. Send specimen refrigerated in a plastic, 13-mL urine tube.

CAUTIONS: Gadolinium and iodine contrast media are known to interfere with most metals tests. If gadolinium or iodine-containing contrast media has been administered, a specimen should not be collected for 48 hours.

LIST FEE: \$124.20

CPT CODE: 83789

ANALYTIC TIME: 1 Day

DAY(S) SET-UP: Tuesday, Friday; Afternoon

QUESTIONS: Contact your Mayo Medical Laboratories Regional Manager
Jim Nielsen, Mayo Medical Laboratories
Telephone: 800-533-1710



TEST DEFINITION

6/23/2009

MML Name/order code cross-reference

Code	Name
89680	Vanadium, Random, U

**** End of Name to order code Report ****

MML MML Test setup information

ORDER CODE	EFF DATE	TC	TITLE	Checking Normals	Print normals (# coded)	Perform Site *
89680	4/8/2009		Vanadium, Random, U			SDL
			Transport temp : Refrig\Ambient OK\Frozen OK			
			89680 Vanadium, Random, U			
			Expect results of form : Could be 3 digits with one decimal and a less than sign.			
			Units: mcg/L			
			NO SEX			
			All Ages :		; <1.0	
			MALE			
			All Ages :		; <1.0	
			FEMALE			
			All Ages :		; <1.0	

*Performing Site Legend

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SDL      Mayo Clinic Dpt of Lab Med & Pathology      LAB DIRECTOR:  Franklin R. Cockerill, III, M.D.
Superior Dr.
3050 Superior Dr. NW
Rochester, MN 55901
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*** End of Report ***

MML

Messages used as normals

CODE

TEXT

Total of 0 normals codes

*** End of Report ***



LABORATORY SERVICE REPORT

1-800-533-1710

PATIENT NAME TESTING, DIANNA		PATIENT NUMBER		AGE 58	SEX F	ACCESSION # G9127487
ORDERING PHYSICIAN		CLIENT ORDER #				ACCOUNT # LIAISONS
COLLECTION 05/21/09 10:03 A	RECEIVED 05/21/09 10:03 A	REPORT PRINTED 06/23/09 01:43 P		SPECIMEN INFORMATION DATE OF BIRTH:		
DATE	TIME	DATE	TIME			
Test Client Attn: Mayo Liaisons 200 First Street SW Rochester, MN 55905 507-284-8202						

TEST REQUESTED	HI LO	REF RANGE	PERFORM SITE *
Vanadium, Random, U Vanadium, Random, U	101.5	mcg/L <1.0	SDL

* PERFORMING SITE

SDL Mayo Clinic Dpt of Lab Med & Pathology Superior Dr 3050 Superior Dr. NW Rochester, MN 55901	Lab Director: Franklin R. Cockerill, III, M.D.
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PATIENT NAME TESTING, DIANNA	ORDER STATUS Final	COLLECTION DATE AND TIME 05/21/09 10:03 A
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Specimen receipt and report times are in CST/CDT

REPRINT

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