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**Overview****Useful For**

Screening for hematuria, myoglobinuria, or intravascular hemolysis

**Method Name**

Dipstick

**NY State Available**

No

**Specimen****Specimen Type**

Urine

**Specimen Required**

**Container/Tube:** Plastic urine container

**Specimen Volume:** 20 mL

**Collection Instructions:**

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

**Forms**

If not ordering electronically, complete, print, and send a [Benign Hematology Test Request Form](#) (T755) with the specimen.

**Reject Due To**

No specimen should be rejected.

**Specimen Minimum Volume**

4 mL

**Specimen Stability Information**

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Specimen Type	Temperature	Time	Special Container
Urine	Refrigerated (preferred)		

## Clinical & Interpretive

### Clinical Information

Free hemoglobin (Hb) in urine usually is the result of lysis of red blood cells present in the urine due to bleeding into the urinary tract (kidney, ureters, bladder). Less commonly, intravascular hemolysis (eg, transfusion reaction, hemolytic anemia, paroxysmal hemoglobinuria) may result in excretion of free Hb from blood into urine.

Injury to skeletal or cardiac muscle results in the release of myoglobin, which also is detected by this assay. Conditions associated with myoglobinuria include hereditary myoglobinuria, phosphorylase deficiency, sporadic myoglobinuria, exertional myoglobinuria in untrained individuals, crush syndrome, myocardial infarction, myoglobinuria of progressive muscle disease, and heat injury.

### Reference Values

COLOR: Colorless, Yellow

CLARITY: Clear

CONCISTENCY: Not reported

HEMOGLOBIN: Negative

Red Blood Cells: <3 RBC/hpf

### Interpretation

Free hemoglobin (Hb), in the presence of red blood cells (RBC), indicates bleeding into the urinary tract.

Free Hb, in the absence of RBC, is consistent with intravascular hemolysis.

**Note:** RBC may be missed if lysis occurred prior to analysis; the absence of RBC should be confirmed by examining a fresh specimen.

The test is equally sensitive to hemoglobin and to myoglobin. The presence of myoglobin may be confirmed by MYGLU / Myoglobin, Random, Urine.

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**Cautions**

Capoten (captopril) may reduce the test sensitivity.

Certain oxidizing contaminants, such as hypochlorite, may produce false-positive results.

Microbial peroxidase associated with urinary tract infection may cause a false-positive reaction.

**Clinical Reference**

1. Fairbanks, V.F. and Klee G.G., Textbook of Clinical Chemistry 1986, Chapter 15, p 1562
2. [Brunzel N](#): Chemical examination of urine. In: Fundamentals of Urine and Body Fluids. 4th ed. 2018:85-125

**Performance****Method Description**

The Clinitek Status+ analyzer is a reflectance spectrophotometer that analyzes the intensity and color of the light reflected from the reagent areas. No calculations are required.(Package insert: Multistix 10 SG Reagent Strip .AN30516J Siemens. Rev. 02/2011)

A microscopic examination is performed on urine sediments by conventional microscopy. All remaining urines have a manual microscopic examination performed on the sediment after centrifuging for 5 minutes at 1400 RPM.

**PDF Report**

No

**Specimen Retention Time**

2 days

**Performing Laboratory Location**

Rochester

**Fees & Codes**

**Test Classification**

This test has been cleared, approved, or is exempt by the US Food and Drug Administration and is used per manufacturer's instructions. Performance characteristics were verified by Mayo Clinic in a manner consistent with CLIA requirements.

**CPT Code Information**

81003

**LOINC® Information**

Test ID	Test Order Name	Order LOINC Value
HGBQ	Hemoglobin, QL, U	57751-0

Result ID	Reporting Name	LOINC®
COLUR	Color, U	5778-6
CLAUR	Clarity, U	32167-9
CONUR	Consistency, U	In Process
HGBH	Hemoglobin, QL, U	57751-0
RBC6	RBC, U	13945-1