



# Test Definition: UOSMS

Osmolality, Serum

**Reporting Title:** Osmolality, S

**Performing Location:** Mayo Clinic Laboratories - Rochester Main Campus

**Specimen Requirements:**

**Collection Container/Tube:**

**Preferred:** Red top

**Acceptable:** Serum gel

**Submission Container/Tube:** Plastic vial

**Specimen Volume:** 2 mL

**Collection Instructions:** Centrifuge and aliquot serum into a plastic vial.

**Forms:**

If not ordering electronically, complete, print, and send a [Renal Diagnostics Test Request](#) (T830) with the specimen.

Specimen Type	Temperature	Time	Special Container
Serum	Refrigerated (preferred)	7 days	
	Ambient	24 hours	
	Frozen	7 days	

**Result Codes:**

Result ID	Reporting Name	Type	Unit	LOINC®
UOSMS	Osmolality, S	Numeric	mOsm/kg	2692-2

LOINC® and CPT codes are provided by the performing laboratory.

**Supplemental Report:**

No

**CPT Code Information:**

83930

**Reference Values:**

275-295 mOsm/kg