Overview

Useful For
Diagnosing risk factors for patients with calcium kidney stones

Monitoring results of therapy in patients with calcium stones or renal tubular acidosis

Special Instructions

- Urine Preservatives-Collection and Transportation for 24-Hour Urine Specimens

Method Name
Enzymatic

NY State Available
Yes

Specimen

Specimen Type
Urine

Necessary Information
Patient's age and 24-hour volume are required.

Specimen Required

Patient Preparation: Any drug that causes alkalemia or acidemia may be expected to alter citrate excretion and should be avoided, if possible.

Supplies: Diazolidinyl Urea (Germall) 5.0 mL (T822)

Container/Tube: Plastic, 5-mL tube (T465)

Specimen Volume: 4 mL

Collection Instructions:

1. Add 5 mL of diazolidinyl urea as preservative at start of collection or refrigerate specimen during and after collection.

2. Collect urine for 24 hours.

3. Mix well before taking 4-mL aliquot.

Additional Information: See Urine Preservatives-Collection and Transportation for 24-Hour Urine Specimens in Special Instructions for multiple collections.

Forms

If not ordering electronically, complete, print, and send a Renal Diagnostics Test Request (T830) with the specimen.
Urine Preservative Collection Options

Note: The addition of preservative or application of temperature controls must occur within 4 hours of completion of the collection.

<table>
<thead>
<tr>
<th>Preservative/Condition</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambient</td>
<td>No</td>
</tr>
<tr>
<td>Refrigerate</td>
<td>OK</td>
</tr>
<tr>
<td>Frozen</td>
<td>OK</td>
</tr>
<tr>
<td>50% Acetic Acid</td>
<td>No</td>
</tr>
<tr>
<td>Boric Acid</td>
<td>OK</td>
</tr>
<tr>
<td>Diazolidinyl Urea</td>
<td>Preferred</td>
</tr>
<tr>
<td>6M Hydrochloric Acid</td>
<td>No</td>
</tr>
<tr>
<td>6M Nitric Acid</td>
<td>No</td>
</tr>
<tr>
<td>Sodium Carbonate</td>
<td>No</td>
</tr>
<tr>
<td>Thymol</td>
<td>OK</td>
</tr>
<tr>
<td>Toluene</td>
<td>No</td>
</tr>
</tbody>
</table>

Specimen Minimum Volume

1 mL

Reject Due To

All specimens will be evaluated at Mayo Clinic Laboratories for test suitability.

Specimen Stability Information

<table>
<thead>
<tr>
<th>Specimen Type</th>
<th>Temperature</th>
<th>Time</th>
<th>Special Container</th>
</tr>
</thead>
<tbody>
<tr>
<td>Urine</td>
<td>Refrigerated (preferred)</td>
<td>14 days</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Frozen</td>
<td>14 days</td>
<td></td>
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</tbody>
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Clinical and Interpretive

Clinical Information

Urinary citrate is a major inhibitor of kidney stone formation due in part to binding of calcium in urine. Low urine citrate levels are considered a risk for kidney stone formation.

Several metabolic disorders are associated with low urine citrate. Any condition that lowers renal tubular pH or intracellular pH may decrease citrate (eg, metabolic acidosis, increased acid ingestion, hypokalemia, or hypomagnesemia).

Low urinary citrate promotes kidney stone formation and growth, and is subject to therapy by correcting acidosis,
hypokalemia, or hypomagnesemia by altering diet or using drugs such as citrate and potassium.

Reference Values

- 0-19 years: not established
- 20 years: 150-1,191 mg/24 hours
- 21 years: 157-1,191 mg/24 hours
- 22 years: 164-1,191 mg/24 hours
- 23 years: 171-1,191 mg/24 hours
- 24 years: 178-1,191 mg/24 hours
- 25 years: 186-1,191 mg/24 hours
- 26 years: 193-1,191 mg/24 hours
- 27 years: 200-1,191 mg/24 hours
- 28 years: 207-1,191 mg/24 hours
- 29 years: 214-1,191 mg/24 hours
- 30 years: 221-1,191 mg/24 hours
- 31 years: 228-1,191 mg/24 hours
- 32 years: 235-1,191 mg/24 hours
- 33 years: 242-1,191 mg/24 hours
- 34 years: 250-1,191 mg/24 hours
- 35 years: 257-1,191 mg/24 hours
- 36 years: 264-1,191 mg/24 hours
- 37 years: 271-1,191 mg/24 hours
- 38 years: 278-1,191 mg/24 hours
- 39 years: 285-1,191 mg/24 hours
- 40 years: 292-1,191 mg/24 hours
- 41 years: 299-1,191 mg/24 hours
- 42 years: 306-1,191 mg/24 hours
- 43 years: 314-1,191 mg/24 hours
Test Definition: CITR
Citrate Excretion, U

44 years: 321-1,191 mg/24 hours
45 years: 328-1,191 mg/24 hours
46 years: 335-1,191 mg/24 hours
47 years: 342-1,191 mg/24 hours
48 years: 349-1,191 mg/24 hours
49 years: 356-1,191 mg/24 hours
50 years: 363-1,191 mg/24 hours
51 years: 370-1,191 mg/24 hours
52 years: 378-1,191 mg/24 hours
53 years: 385-1,191 mg/24 hours
54 years: 392-1,191 mg/24 hours
55 years: 399-1,191 mg/24 hours
56 years: 406-1,191 mg/24 hours
57 years: 413-1,191 mg/24 hours
58 years: 420-1,191 mg/24 hours
59 years: 427-1,191 mg/24 hours
60 years: 434-1,191 mg/24 hours
>60 years: not established

Interpretation
Any value less than the mean for 24 hours represents a potential risk for kidney stone formation and growth. Patients with low urinary citrate, and new or growing stone formation, may benefit from adjustments in therapy known to increase urinary citrate excretion. (See Clinical Information)

Very low levels (<150 mg/24 hours) suggest investigation for the possible diagnosis of metabolic acidosis (eg, renal tubular acidosis).

Cautions
Drugs that lower systemic pH, potassium, and/or magnesium, lower urine citrate and are to be avoided in patients with a tendency to form calcium stones.

Conversely, drugs that raise systemic pH, potassium, and/or magnesium, may raise urine citrate and should be considered in treating patients or interpreting results.

Clinical Reference
Test Definition: CITR
Citrate Excretion, U


Performance

Method Description
Citric acid in the presence of Zn(++) at pH 8.2 is catalyzed to oxaloacetate by the enzyme, citrate lyase. Oxaloacetate in the presence of malate dehydrogenase and reduced nicotinamide adenine dinucleotide (NADH) is reduced to malate (II). By measuring the disappearance of the light-absorbing NADH, the citric acid concentration in the reaction mixture can be determined. By correcting this concentration for dilution and 24-hour volume, the amount of citric acid excreted per 24 hours is obtained. (Nielsen TT: A method for enzymatic determination of citrate in serum and urine. Scand J Clin Lab Invest 1976;36:513-519)

PDF Report
No

Day(s) and Time(s) Test Performed
Monday through Saturday; 8 a.m.-4 p.m.

Analytic Time
Same day/1 day

Maximum Laboratory Time
3 days

Specimen Retention Time
7 days

Performing Laboratory Location
Rochester

Fees and Codes

Fees
- Authorized users can sign in to Test Prices for detailed fee information.
- Clients without access to Test Prices can contact Customer Service 24 hours a day, seven days a week.
- Prospective clients should contact their Regional Manager. For assistance, contact Customer Service.

Test Classification
This test was developed and its performance characteristics determined by Mayo Clinic in a manner consistent with CLIA requirements. This test has not been cleared or approved by the U.S. Food and Drug Administration.

CPT Code Information
82507

LOINC® Information

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<th>Order LOINC Value</th>
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<td>Citrate Excretion, U</td>
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<th>Test Result Name</th>
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<tr>
<td>CITRT</td>
<td>Citrate Excretion, U</td>
<td>6687-8</td>
</tr>
<tr>
<td>TM51</td>
<td>Collection Duration</td>
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<td>VL49</td>
<td>Urine Volume</td>
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<td>CITC1</td>
<td>Citrate Concentration</td>
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