

2011481

Mercury, Random Urine

U MERCRAND

**Performed:** Sun-Sat  
**Reported:** 1-3 days

**Specimen Required:** Patient Prep: Diet, medication, and nutritional supplements may introduce interfering substances. Patients should be encouraged to discontinue nutritional supplements, vitamins, minerals, and non-essential over-the-counter medications (upon the advice of their physician), and avoid shellfish and seafood for 48 to 72 hours. High concentrations of iodine may interfere with elemental testing. Collection of urine specimens from patients receiving iodinated or gadolinium-based contrast media should be avoided for a minimum of 72 hours post-exposure. Collection from patients with impaired kidney function should be avoided for a minimum of 14 days post-contrast media exposure.

Collect: Random urine.

Specimen Preparation: Transfer an 8 mL aliquot from a well-mixed collection to ARUP Trace Element-Free Transport Tubes (ARUP supply #43116), available online through eSupply using ARUP Connector contact ARUP Client Services at (800) 522-2787. (Min: 1 mL).

Storage/Transport Temperature: Refrigerated. Also acceptable: Room temperature or frozen.

Unacceptable Conditions: Urine collected within 72 hours after administration of iodinated or gadolinium-based contrast media. Acid preserved urine. Specimens contaminated with blood or fecal material. Specimens transported in non-trace element free transport tube (with the exception of the original device).

Stability (collection to initiation of testing): Ambient: 1 week; Refrigerated: 2 weeks; Frozen: 1 year

**Reference Interval:**

Effective November 12, 2018

Components	Reference Interval
Mercury, Urine - per volume	0-5.0 µg/L
Mercury, Urine - ratio to CRT	0.0-20.0 µg/gCRT

**Interpretive Data:** Urinary mercury levels predominantly reflect acute or chronic elemental or inorganic mercury exposure. Urine concentrations in unexposed individuals are typically less than 10 µg/L. 24-hour urine concentrations of 30 to 100 µg/L may be associated with subclinical neuropsychiatric symptoms and tremors. Concentrations greater than 100 µg/L can be associated with overt neuropsychiatric disturbances and tremors. Urine mercury levels may be useful in monitoring chelation therapy.

See Compliance Statement B: [www.aruplab.com/CS](http://www.aruplab.com/CS)