

# Day and night urine collection (cystine)

This leaflet explains how to collect daytime and nighttime urine for cystine testing. Daytime and nighttime urine should be collected separately.

## **Preparation: what do you need?**

Two urine collection containers, one for the daytime collection and one for the nighttime collection. A urine collection container is a brown, square container with a yellow cap.

## **Important information in advance**

### **Menstruation and stool during urine collection**

Do not collect urine when you are menstruating. Also make sure the urine is not contaminated with feces. Urine mixed with (traces of) blood or feces cannot be used for the laboratory tests.

### **Diet**

Depending on the purpose of the laboratory test you may not be allowed to eat and/or drink before and/or during the urine collection. If applicable, your physician has explained what you cannot eat or drink (sometimes with another information brochure).

### **Forgot to collect a portion of urine**

If you forgot to collect a portion of urine during the daytime or nighttime collection, then the collection has failed. You have to discard the already collected urine from both containers, rinse the containers with water (no soap) and then start over the next morning.

### **Collected more than 3 liters of urine?**

If your physician expects you to urinate more than 3 liter during the daytime collection, you will receive 2 collection containers for the daytime urine. After collection, read the amount of urine from both daytime containers. Add the amounts together and write the total amount of urine on the form.

### **When do you bring the collected urine to the hospital?**

Bring the urine container(s) or sample tube(s) to the Poli Bloedafname (Blood Collection Department) at location AMC or VUmc on the same morning that you finished the collection. Please see the location and opening hours at the bottom of the laboratory form.

# Instructions day and night urine collection

## Daytime urine collection in first container



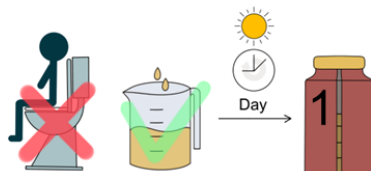
Step 1. When you get up in the morning, urinate first into the toilet. Make sure to empty your bladder completely. Do not collect this urine in the container.



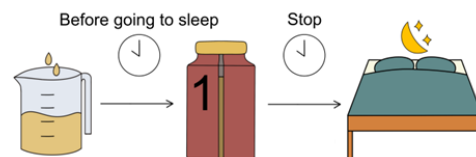
Step 2. Write the date and time of urinating in the toilet on the form. This is the start time of the urine collection.



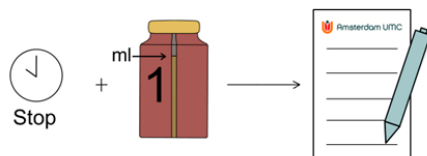
Step 3. Collect all your urine during the rest of the day in the **first** container. You can collect the urine in a measuring cup and then pour it into the container.



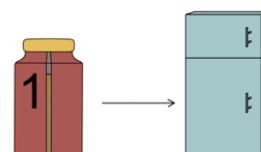
Step 4. Collect the urine before going to bed in the first container. After this, the **daytime** urine collection is complete.



Step 5. Write down the end time of the **daytime** collection and the total amount of urine on the form.



Step 6. Close the container tightly and store it in the refrigerator.



## Nighttime urine collection in second container



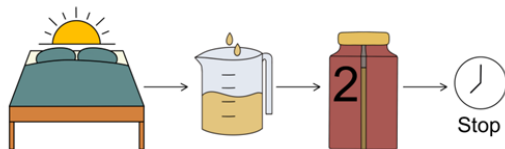
Step 7. The end time of the daytime collection is the start time of the nighttime collection. Write this start time on the form.



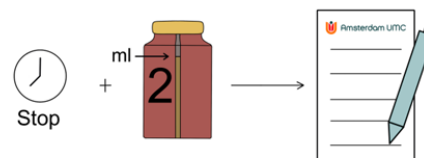
Step 8. Collect all urine during the night in the second container.



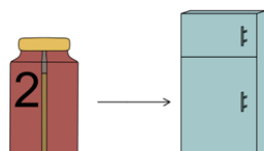
Step 9. Collect the first urine of the next morning in the second container. After this morning urination, the nighttime collection ends and the urine collection is complete.



Step 10. Write down the end time of the **nighttime** collection and the total amount of urine on the form.



Step 11. Close the container tightly and store it in the refrigerator.



Step 12. Bring the both containers and the completed form to the Blood Collection Department (Poli Bloedafname).



Illustrations by: Rosalie C. Martens

## Laboratory form day and night urine collection

If you have received a paper lab form, you may also record the following information on that form.

|                                                 |  |
|-------------------------------------------------|--|
| Name                                            |  |
| Date of birth                                   |  |
| Patient ID number                               |  |
| <b>Daytime collection in first container</b>    |  |
| Start date                                      |  |
| Start time                                      |  |
| End date                                        |  |
| End time                                        |  |
| Amount of urine (ml)                            |  |
| <b>Nighttime collection in second container</b> |  |
| Start date                                      |  |
| Start time                                      |  |
| End date                                        |  |
| End time                                        |  |
| Amount of urien (ml)                            |  |

## Where to bring the collected urine and this form?

Please bring the collected urine (one or more bottle(s) and/or sample tube(s)), together with this completed laboratory form, to:

- **Location AMC, Poli Bloedafname (Blood Collection Department)**  
Building Q, ground floor, route 41.  
Open on working days between 08.00 am and 16.30 pm.  
Telephone: 020 - 566 58 77 or 020 - 566 23 84.
- **Location VUmc, Poli Bloedafname (Blood Collection Department)**  
Reception P, outpatient clinic building, first floor.  
Open on working days between 07.30 am and 17.00 pm.  
Telephone: 020 - 444 54 16.