

C_CBL_RESULT-URINE

AFRICAN AMERICAN STUDY OF KIDNEY DISEASE AND HYPERTENSION
AASK COHORT STUDY
CENTRAL BIOCHEMISTRY LAB URINE DATA FORM # 125

This form is completed and key entered by the staff of the CBL. The data on this form are used to generate Report 193.

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1. Identification Number.....

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2. Name Code.....

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3. Visit Number...

- 4. Date urine collection started (mm/dd/yyyy) / / ^{START-DT}
- 5. Date urine received (mm/dd/yyyy) / / ^{RECV-DT}
- 6. Date urine assayed (mm/dd/yyyy) / / ^{ASSAY-DT}

Analysis for 24-hour urine collection (central analysis):

- 7. U. Protein (mg/dL) ^{UP}
- 8. U. Sodium (mmol/L) ^{UNA}
- 9. U. Potassium (mmol/L) ^{UK}
- 10. U. Creatinine (mg/dL) ^{UCR}
- 11. U. Urea Nitrogen (mg/dL) ^{UUN}
- 12. U. Albumin (mg/dL) ^{UAL}

200. Date this form completed (mm/dd/yyyy) / / ^{COMPL-DT}

201. Certification ID of person completing this form ^{COMPL-BY}