

Overview

Useful For

Assessment of patients with metabolic acidosis

Assessment of crystalluria

Monitoring the effectiveness of alkalization or acidification of urine for certain medical conditions (eg, treatment of uric acid nephrolithiasis)

Method Name

pH meter

NY State Available

No

Specimen

Specimen Type

Urine

Specimen Required

Supplies: Urine Tubes, 10 mL (T068)

Container/Tube: Plastic, 10-mL urine tube

Specimen Volume: 10 mL

Collections Instructions: Collect a random urine specimen.

Specimen Minimum Volume

1 mL

Reject Due To

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

Specimen Stability Information

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

Clinical & Interpretive

Clinical Information

Urine pH is a measure of the acidity/alkalinity of urine and, by itself, usually provides little useful information. Under normal conditions its value is influenced by the type of diet (some diets: eg, diets rich in meat-having more acid content than others, eg, vegetarian diets). Assessment of urine pH may be useful in the evaluation of systemic acid-base disorder. For example, the normal response during metabolic acidosis is a lowering of the urine pH to less than 5. If it is greater than 5, then a defect in urine acidification should be considered. Often a urine pH above 8 is suggestive of infection of a urea splitting organism such as *Proteus mirabilis*. Monitoring of urine pH may also be helpful during therapeutic interventions to either alkalinize the urine (such as for treatment of uric acid nephrolithiasis) or acidify the urine. Finally, when assessing crystalluria, noting the urine pH may be helpful since some crystals have a propensity to form in alkaline urine while others form in relative acidic urine.

Reference Values

4.5 to 8.0

Interpretation

Dependent on clinical condition.

Cautions

A pH greater than 8 suggests the presence of urinary tract infection with a urea splitting organism.

Clinical Reference

1. Menezes CJ, Worcester EM, Coe FL, Asplin J, Bergsland KJ, Ko B: Mechanisms for falling urine pH with age in stone formers. *Am J Physiol Renal Physiol*. 2019 Jul 1;317(7):F65-F72. doi: 10.1152/ajprenal.00066.2019
2. Ilyas R, Cho K, Young JG: What is the best method to evaluate urine pH? A trial of three urinary pH measurement methods in a stone clinic. *J Endourol*. 2015 Jan;29(1):70-4. doi: 10.1089/end.2014.0317
3. Davidsohn I, Henry JB: *Todd-Sanford Clinical Diagnosis by Laboratory Methods*; 15th ed. Elsevier; 1974:43-44
4. Free AH, Free HBS: *Urodynamics, concepts relating to urinalysis*. Ames Co; 1974;57-61
5. Kaplan LA, Pesce AJ: *Clinical Chemistry: Theory, Analysis, Correlation*. 3rd ed. Mosby-Year Book Inc; 1996:823

Performance

Method Description

The pH meter measures the difference in electrical potential between a pH electrode and a reference electrode.(Instruction manual: UltraBasic pH Meter. Denver Instrument. 902388.1.Rev. A; 05/2019)

PDF Report

No

Day(s) Performed

Monday through Sunday

Report Available

Same day/1 day

Specimen Retention Time

7 days

Performing Laboratory Location

Phoenix

Fees & 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 account representative. For assistance, contact [Customer Service](#).

Test Classification

This test has been cleared, approved, or is exempt by the US Food and Drug Administration and is used per manufacturer's instructions. Performance characteristics were verified by Mayo Clinic in a manner consistent with CLIA requirements.

CPT Code Information

83986

LOINC® Information

Test ID	Test Order Name	Order LOINC® Value
PHU_	pH, Random, U	2756-5

Result ID	Test Result Name	Result LOINC® Value
PHU_	pH, Random, U	2756-5