






Returning Samples to Rocky Mountain Analytical

-  Place the green-topped test tube sample (4 ml of urine) in the zip-lock bag and seal the bag tightly; leaving the absorbent square inside the bag (NOT inside the sample tube).
-  Place the sample in the insulated white foam container with cold pack and **freeze overnight**.
-  **Place the frozen sealed insulated white foam container containing the urine sample and cold pack in the kit box.** Then put the box with the completed Urine Requisition Form inside the Priority Post flexipack envelope, making sure the pre-paid address label is visible to postal employees.
-  Take the addressed pre-paid Priority Post flexipack to your nearest Postal Outlet **Monday or Tuesday only. (DO NOT mail on Thursday, Friday or the day before a holiday).**
-  **Please ensure that your Postal Code appears in the "From" section of the address label.**

Method of Payment

- ① Your health care provider has the information regarding billing. At his/her request, you may be asked to send payment directly to Rocky Mountain Analytical. If this is the case, please send either cheque or a completed credit card authorization form (available from your health care provider or on our website: www.rmalab.com) with your sample. GST must be included in your payment.

Privacy Information

- ① Your health care provider's initials or signature on the requisition is our legal authority for analyzing your urine specimen. The personal information you provide allows us to provide a thorough analysis of your urine hormones. This information will be stored confidentially and used only for the purpose of analyzing your specimen. Some aggregate data may be used for research purposes. If you have any questions regarding this or any other issue regarding urine hormone testing, please contact Rocky Mountain Analytical at: Unit A, 253147 Bearspaw Road, Calgary, Alberta T3L 2P5. Phone 403-241-4513 or Fax at 403-241-4516. Our email address is info@rmalab.com.



PATIENT COLLECTION INSTRUCTIONS FOR ESTROGEN METABOLISM RATIO

KIT CONTENTS

- Requisition Form
- Collection Instructions
- Sterile orange-topped urine collection container
- Transfer pipette
- 1 of 10mL green-topped test tube each containing ascorbic acid (vitamin C)
- Resealable plastic specimen bag with absorbent square
- White insulated foam container with 1 cold pack inside
- Prepaid Priority Post envelope

****Important : Keep the absorbent square in the plastic bag as insurance against spillage.**

TEST REPORTS

Please allow 14 days after sample is received at Rocky Mountain Analytical for the completion of the test report. Test reports will be sent to the ordering practitioner.

Rocky Mountain Analytical
Unit A, 253147 Bearspaw Road NW
Calgary, AB T3L 2P5
Phone: (403) 241-4513

General Testing Information

- ① Rocky Mountain Analytical is a testing laboratory and does not diagnose, prescribe or make specific treatment recommendations. Testing is for research purposes only.
- ① Note: women should collect urine the week after period ends. **Do not collect urine while menstruating.**
- ① **Please place white foam container containing the cold pack in freezer at least 3 hours before urine collection.**
- ① Urine collection should be taken during the first void of the day and after a minimum 8-hour fast (overnight fast). Drinking juice or water is acceptable.
- ① During collection, please maintain your usual dietary habits. It is not necessary to increase or decrease your fluid intake.

Instructions for Collection of Urine

- ✓ Lay out the kit contents the night prior to beginning collection.
- ✓ Urine is to be collected using the Start/Stop/Collect method. *Start* to urinate (first thing in the morning), *Stop* briefly to get the orange topped collection container into position and then *Collect* the sample (also called the mid-stream sample method).
- ✓ Once urine has been collected in large orange-topped container, use transfer pipette (long plastic tube with squeeze bulb at top) to transfer urine from large container to the 10ml green-topped tube. **Add 4 mL of urine** (to the indicated red line) **to the green-topped test tube** (total sample should be 4 mL). Note, the tube must contain no more than 4 mL urine or the pH will be wrong. Discard large container and dispose of excess urine in toilet.
- ✓ After ensuring the green test tube lid is properly and snugly screwed on, place the test tube in the supplied plastic bag (containing the absorbent square of material) and seal the bag. If test tube has residual moisture on the outside after collection, please wipe it down (ex. with a paper towel). Also remember to write your name, the date and time of collection on the test tube label (with a black pen please).
- ✓ **Place urine sample tube in freezer overnight in the insulated white container with cold pack. The next day, place the frozen, contained sample into the kit box and into the prepaid mailer to be mailed to the laboratory.**
- ✓ After completing the urine collection, please **complete the Urine Requisition Form. This form *must* accompany the mailed sample.**
- ✓ Package sample as per instructions "Returning Samples to Rocky Mountain Analytical" on back of Collection Instructions and **mail frozen sample on a Monday or Tuesday only. (DO NOT mail on Thursday, Friday or the day before a holiday).**

Collection Instructions If On Medications

- ♦ Research has shown that supplementation with oral or transdermal estrogens does not affect the Estrogen Metabolism Ratio. If hormone dose is usually taken/applied in the morning, please wait until after the urine sample has been collected.
- ♦ If you are being treated for any urinary or vaginal condition (e.g. yeast infection), please call the lab before you collect your sample.

Timing of Sample

Women

- ♦ Regular cycles: Collect urine one week after the last day of bleeding.
- ♦ Irregular cycles: Do not test while menstruating.
- ♦ Postmenopausal: Can do the test at any time of the month.

Men

- ♦ Men can test at any time of the month.

Completing the Requisition

- ✗ Please use **only ball point pen** black or blue ink (no markers, gel pens or red ink) to mark the requisition and green-topped tube. The following information is to be included on the requisition form:
- ✗ **Provider Information :** We need the health care provider's name, address, and signature (or initials) in the health care provider box. We cannot process results without this information.
- ✗ **Contact Information:** Please include your name and address so we know who you are.
- ✗ **Height, Weight, Date of Birth:** We cannot analyze your sample without your date of birth. Height and weight are body mass indicators and assist interpretation of results and research.
- ✗ **Menstrual History:** We need to know if you're still cycling, and if so, when the date of your last period was.
- ✗ **Volume of Urine:** Provide **only the amount of urine requested** (fill line) in the green-topped test tube. In this case, **more is not better.** The tube has a measured amount of ascorbic acid to preserve 4ml of urine.
- ✗ **Hormone/Medication Use:** Some supplements can alter the Estrogen Metabolism Ratio. Please list all the supplements and hormones you are taking. Use a separate sheet of paper if necessary.
- ✗ **Relevant Medical Information:** Although this is optional, this information helps us with the interpretation of your results. As more people are tested, we are able to see the relationships between test results and medical information.
- ✗ **Test Order:** Please ensure that the test to be ordered is clearly indicated on the requisition form.