

Acid-Base Balance according to Sander (L110)



Testanleitung

The test set contains the following materials:

1 x Request Form

1 x Test Instructions

5 x Tube with stabilizing

5 x Transport container

Please collect 5 urine samples at following times of the day:

1. Sample	6 a.m.	→	then have breakfast
2. Sample	9 a.m.		
3. Sample	12 noon	→	then have lunch
4. Sample	15 p.m.		
5. Sample	18 p.m.	→	then have dinner

Please note deviating urine sample times. Please pay attention to the numbers! For collecting urine please choose a day during which you can comply with following requirements:

You are only allowed to have **3 meals** on the day of testing:

• Breakfast after taking	1. Sample	(6 a.m.)
• Lunch after	3. Sample	(12 noon) and
• Dinner after	5. Sample	(6 p.m.)

Please do not take **base tablets** (i.e. Bullrich's Vital, base powder) on the day of the test and two days prior to testing. Please empty bladder completely when taking each sample. If you can only pass little water, have a glass of water after each sample to provide for better secretion during the following sampling. If you cannot hold urine for three hours collect the whole urine secreted - for example between 9 a.m. and 12 noon - and add it to the next sample. Close the container tightly, fill in the questionnaire and mail everything preferably on the same day. Please make sure to put on enough postage.

Please pay attention to the fact that the stabilizer (**white powder** in the urine tubes containing **4 mg thymol**) may cause irritations if it comes in contact with skin, mucosa or eyes. Please avoid direct contact. In case of accidental contact please rinse with water immediately, respectively - in case of eye contact - see an eye specialist immediately.

Please be sure to label sample containers with:

- Name
- Date

Please insert the labeled urine tube into the transport container (a protective tube for shipment) and close the lid tight. Place the transport tube containing the urine sample together with the completed request form in the return envelope.

Important: Please do NOT post your sample on Fridays (weekend) or before holidays!



Questionnaire – Urine Test according to Sander

Date of Urine Collection:			
Average drinking amount per day and type of drinks:			
Taking laxatives:	no <input type="checkbox"/>	yes <input type="checkbox"/>	if yes – which:
Taking base preparations:	no <input type="checkbox"/>	yes <input type="checkbox"/>	if yes, which and how often:
Taking dietary supplements:	no <input type="checkbox"/>	yes <input type="checkbox"/>	if yes, which and dosage: