**TEST PREP AND SHIPPING**

1. Place biohazard bag with frozen urine tubes, frozen freezer brick, and absorbent material in foam insulator box inside the outer collection box.
2. If also collecting the cheek swab samples, bring the envelope with the swabs.
3. Bring collections to your clinician the day of the blood draw.

**RETURN CHECKLIST**

- All Tubes with peel and stick labels with patient’s date of birth
- FROZEN GREEN-TOP URINE TUBE
- FROZEN GREEN-TOP PRESERVATIVE TUBE
- FROZEN BLUE-TOP AMBER TUBE
- ENVELOPE WITH SWABS INSIDE
- TEST REQUISITION

- All frozen urines inside biohazard bag with absorbent pads
- All materials including frozen freezer brick inside Genova box

**COLLECTION MATERIALS - KEEP OUTER BOX FOR SHIPPING TO LAB**

**AT-HOME URINE COLLECTION**

- FROZEN BLUE-TOP AMBER TUBE
- FROZEN GREEN-TOP PRESERVATIVE TUBE
- GREEN-TOP URINE TUBE
- GREEN-TOP PRESERVATIVE TUBE
- FROZEN URINES INSIDE BIOHAZARD BAG WITH ABSORBENT MATERIAL

**AT-HOME SWAB COLLECTION**

- RUBBER BAND
- TEST REQUISITION FORM
- PEEL AND STICK LABELS
- VIAL SLEEVE
- FEDEX® ENVELOPE
- BILLABLE STAMP

**TEST REQUISITION FORM - RETURN WITH SHIPPING BOX**

Complete all sections using the paper form included or online at www.gdx.net/mygdx for clinicians www.gdx.net/prc for patients

Watch the How-to Video at www.gdx.net/mygdx or www.gdx.net/prc

Both methods require the paper form to be returned with the pack.

**PEEL AND STICK COLLECTION LABELS**

Fill out all the peel and stick labels with ONLY your date of birth (DOB) (mm/dd/yyyy) and apply to all the tubes, the swab envelope, and the requisition.

Do not write on the tubes.
**VERY IMPORTANT**

Abnormal kidney function or use of diuretics may influence test results

Do not collect if there is blood in urine, including menstrual or other blood

Medications
Check with your clinician whether it is necessary to discontinue medications/supplements

**THE DAY BEFORE THE URINE COLLECTION**

Eat usual diet avoid over-eating any single food or extreme diet

Limit to (6) 8-ounce glasses of fluid over 24 hours before collection

Freeze the freezer brick overnight

Fast overnight prior to urine collection and blood draw - water is okay

**URINE COLLECTION**

*Have a clean container available to urinate into (a large plastic cup will work)*

1. If you wake up during the night, within 6 hours of your morning urination, collect that urine into a clean container – and refrigerate it. Upon waking in the morning, collect your urine into the same container.

2. Use the pipette to transfer urine from the collection container into the green-top preservative tube, blue-top amber tube, and green-top urine tube until all are nearly full. Avoid contact with the skin and eyes. For eye contact, flush with water thoroughly for 15 minutes. For skin contact, wash thoroughly with soap and water. If ingested, contact poison control center immediately.

3. Recap the tubes tightly and shake.

4. Place a peel and stick label on all the tubes and the test requisition. Make sure your date of birth (mm/dd/yyyy) is filled out.

5. Place the tubes into the biohazard bag labeled BAG ONE and freeze for a minimum of 2 hours.

**CHEEK SWAB COLLECTION**

**THE NIGHT BEFORE**

Use your normal nightly routine of brushing and flossing of teeth, but do not use mouthwash

**THE MORNING OF COLLECTION**

Just prior to collection, wash hands thoroughly with soap

Cheek swab must be collected immediately upon rising. Do not practice normal oral hygiene routine. Do not eat or drink anything other than water.

**CHEEK SWAB COLLECTION - COMPLETE ONLY IF ORDERED BY CLINICIAN**

1. Keeping the packet intact, peel open the package labeled, “Sterile Cotton Tipped Applicator.” *Only peel back the package far enough to remove the cotton swab applicator.*

2. Remove one cotton swab applicator. *Do not touch the cotton tip.*

3. Open your mouth widely and insert cotton tip of the swab applicator. For at least 30 seconds, aggressively scrape the inside of your cheek using a back and forth, and up and down motion. Rotate the applicator several times, and swab between the cheek and gums. Avoid excessive saliva.

4. REPEAT 2 - 3 WITH SECOND SWAB

5. Allow swab applicators to air dry for 15-20 minutes, then replace them (swab first) into the swab applicator package.

6. Place a peel and stick label on the envelope. Make sure your date of birth (mm/dd/yyyy) is filled out.

7. Insert swab applicator package into the envelope and seal.