
Lab Dept: Urine/Stool

Test Name: FENA

General Information

Lab Order Codes: FENA

Synonyms: Sodium, Fractional Excretion; Fractional Excretion of Sodium

CPT Codes: 82565 – Creatinine, blood
82570 – Creatinine, other source
84295 – Sodium, serum
84300 – Sodium, urine

Test Includes: Plasma Sodium concentration in mEq/L, Urine Sodium concentration in mEq/L, Plasma Creatinine concentration in mg/dL, Urine Creatinine in mg/dL

Logistics

Test Indications: Useful in defining the extent of sodium conservation by the kidneys. It may also help identify certain diseases of the kidney.

Lab Testing Sections: Chemistry

Phone Numbers: MIN Lab: 612-813-6280
STP Lab: 651-220-6550

Test Availability: Daily, 24 hours

Turnaround Time: 1 day

Special Instructions: A urine specimen should be collected at the same time or as close as possible to the time of plasma/serum collection. The plasma/serum must be collected within 48 hours of the urine specimen.

Specimen

Specimen Type: Plasma/Serum and Urine, random

Container: Serum/Plasma: Green top tube (Lithium Heparin) or SST (gold, marble or red top tube)

Urine: Plastic leak proof container (No preservatives)

Draw Volume: 0.6 mL blood and 1 -3 mL random urine

Processed Volume:	0.2 mL plasma/serum and 0.5 mL urine
Collection:	A random urine sample may be obtained by voiding into a urine cup and is often performed at the laboratory. Bring the refrigerated container to the lab. Make sure all specimens submitted to the laboratory are properly labeled with the patient's name, medical record number and date of birth.
Special Processing:	Lab Staff: Blood: Centrifuge specimen, remove serum/plasma aliquot into plastic sample cup. Analyze sample immediately or store at refrigerated temperatures. Urine: Centrifuge all specimens before analysis.
Patient Preparation:	Eat a normal diet with a normal amount of salt. Certain diuretic medications may affect results.
Sample Rejection:	Mislabeled or unlabeled specimens

Interpretive

Reference Range:	Expected value: 1 – 3% Prerenal Azotemia: <1.0% Acute Tubular Necrosis: >3.0%
Critical Values:	N/A
Limitations:	See Patient Preparation
Methodology:	Enzymatic Creatinine/Indirect Multi-sensor Sodium
References:	Burtis, CA, Ashwood, ER (1999) Tietz Textbook of Clinical Chemistry, 3rd Edition, W.B. Saunders Co. 1999, pp 1057-1058 Medline Plus Health Information, www.nlm.nih.gov/medlineplus Jacobs & DeMott Laboratory Test Handbook (2001) Lexi-Comp, Inc, Hudson, OH, 5th Edition
Updates:	7/14/2014: Method update, previously listed as Alaline Picrate/Kinetic/Integrated Multisensor Technology 9/27/2017: Updated lab specimen processing.