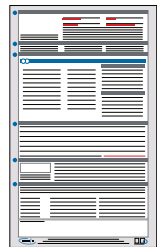


KIT CONTENTS

If you have questions, please call your provider before proceeding. If your kit is missing components, call (800) 323-2784 for a replacement.



Cardboard kit box

Insulated cooler with lid
(keep in kit box)Ice pack
(place in freezer immediately)Plastic bag containing:
1 urine tube and 1 absorbent padurine collection cup
(separate from kit contents)OPTIONAL
24-hour urine collection container
(separate from kit contents)

Requisition form



Patient survey

FedEx Clinical Pak
(USA Only)FedEx Return
Label/Stamp
(USA Only)

PREPARATION

The testing for **neurotransmitter analysis** can be performed from a 1st or 2nd morning void, or a 24-hour urine collection.

The testing for **amino acid analysis** can be performed from a 1st morning void or a 24-hour urine collection.

BEFORE YOU START: Please read all of the instructions carefully. Your physician has ordered this testing. Make sure that your physician has selected a test profile on the requisition form. Consult with your doctor regarding any dietary recommendations or supplement and medication usage during this collection. Menstruating women should not collect urine during their period.

RECOMMENDATIONS BEFORE AND DURING COLLECTION

NEUROTRANSMITTER ANALYSIS

2 days before and during collection

Avoid avocados, eggplant, tomatoes, bananas, kiwi, melons, pineapple, grapefruit, plums, nuts, nut butters, wine, cheese, rice, and chocolate

1 day before and during collection

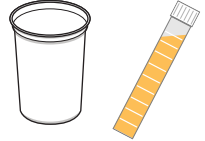
Avoid strenuous exercise, alcohol, caffeinated beverages, and nicotine products. On the day before and during testing, it is recommended to avoid all supplements and medications until after all samples have been collected (including those that regulate allergy, mood, sleep, pain and inflammation.) *Never discontinue prescription medications without consulting your physician.*

AMINO ACID ANALYSIS

Eat a regular diet that contains protein the day before and during collection. If possible, discontinue non-essential medication and supplements 48 hours prior to collection. Do not collect when taking antibiotic medication.

SPOT COLLECTION

Your physician should have provided you with a separate plastic collection cup to be used to collect urine. Any clean container can be used to collect urine.



If you are collecting a 24-hour urine collection, go immediately to page 5.

1. When you wake up and get out of bed for the day, you can collect either the 1st morning void of the day (for neurotransmitters or amino acids) or the 2nd morning void (for neurotransmitters only.)

In the Collection Information Section of the Requisition, fill in the waking time and the time that the urine was collected.
Mark the box for collection type: 1st or 2nd morning.

2. Collect a midstream specimen of urine in the collection cup. DO NOT urinate directly into the tube. The tube contains an acid preservative* that may irritate the skin.

3. Pour the urine into the specimen vial. Fill the vial to the fill line – do not underfill. Close vial tightly to ensure a good seal. Gently rock the tube back and forth to mix urine with the preservative.*

4. Complete the requested information on the tube label: name, date of birth, date and time of collection.

5. Place the tube inside the plastic zip-lock bag with the absorbent material and seal.

6. Freeze the urine sample for at least 4-6 hours and keep frozen with the frozen ice pack until ready to ship. *Your collection is now complete, continue to page 6 for shipping instructions.*

*Please note: specimen vial contains approximately 60mg of oxalic acid. Do not ingest or inhale. Wipe spills with a wet towel. In case of contact with skin, wash with soap and plenty of water. In case of accidental contact to eye or ingestion, rinse with plenty of water. Seek medical attention if warranted.

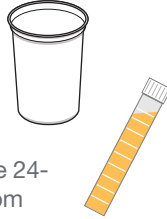
5

24-HOUR COLLECTION (OPTIONAL)

1. When you wake up and get out of bed for the day, urinate into the toilet and flush – do not save this urine. **Begin the 24-hour collection with the 2nd void of the day and collect all urine up to and including the 1st morning void of the following day.**



2. Collect urine in the collection cup. Pour the urine into the large orange 24-hour collection container. Keep the urine cold during the 24-hour period (in a refrigerator or a cooler)



3. After all of the urine has been collected, place the large 24-hour container on a level surface and read the volume from the markings on the container.

In the Collection Information Section of the Requisition, fill in the date of collection, the waking time, and total 24-hour volume. **Mark the box for 24-hour collection.**

4. Mix the urine by shaking the large container. Pour the urine into the specimen vial. Fill the vial to the fill line – do not underfill. Close vial tightly to ensure a good seal. Gently rock the tube back and forth to mix urine with the preservative* (see page 4). After pouring urine into specimen vial, the remaining urine in the 24-hr container can be discarded in the toilet and the container discarded. Do not send the large container with urine back to the lab.

5. Complete the requested information on the tube label: name, date of birth, date and time of collection, and 24-hour volume.

6. Place the tube inside the plastic zip-lock bag with the absorbent material and seal.

7. Freeze the urine sample for at least 4-6 hours and keep frozen with the frozen ice pack until ready to ship.

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SHIPPING

PREPARE THE PACKAGE

1. **Ship Monday - Friday only.** You will be charged a pick-up fee if you call for a Saturday pick-up. Weekend or holiday collection: keep the specimen in the freezer until the following business day to ship.

2. ***Fill out the test requisition form completely and sign it.** The test cannot be performed without a properly filled out requisition, and payment information, if required. Fill out the patient survey.

3. **Remove Zip-lock bag containing frozen specimen tube and ice pack from the freezer.** Place these items inside the insulated cooler and replace the lid securely.

4. **Place the insulated cooler inside the cardboard kit box.** Place the Requisition form, Patient Survey and any payment (if applicable) into the cardboard kit box. Close the cardboard box.

5. **Open up the FedEx plastic Clinical Pak and affix the provided Prepaid label onto the bag in the designated location.** Record the tracking number printed on the label if you want to track this delivery.

6. **Place the cardboard box inside the Clinical Pak and seal to securely close.**

***Fill out ALL pages of the requisition, including collection date, DOB and sex. Any missing information will lead to delays.**

SCHEDULE A PICK-UP (USA ONLY)

To schedule a pickup, call FedEx toll-free at 1-800-463-3339 (1-800-GO FEDEX). When you hear the automated greeting, say “Schedule a pick up.” The next prompt asks if the shipment is more than 150lbs, say “No.” At the next prompt, say “Schedule a Pick up with a Label or Stamp.” Reply “YES” when asked if the word “Stamp” is written on the waybill. You will then be asked for your address information. **DO NOT USE A DROP BOX or leave your kit outside (especially in warm temperatures).**

In some cases, Doctor’s Data provides prepaid shipping from certain countries outside the United States. If that policy pertains to this collection kit, then country specific shipping materials (including an Air Waybill and instructions) will be included in the kit contents. If there are not any shipping materials included or you choose to use a different courier or level of service than provided, you must make your own shipping arrangements at your own expense.

neurotransmitter analysis
amino acid analysis
URINE COLLECTION



INSTRUCTIONS

Read all instructions before collecting specimens.



Scan code for expanded
instructions and FAQs



SCIENCE + INSIGHT