



Urinalysis

Urinalysis

- It can detect diseases which pass unnoticed
- Diagnosis of many renal diseases
- Screening for drug abuse (e.g. Sulfonamide or aminoglycosides).

Collection of urine specimens

- For most of the routine investigations fresh midstream specimen of 10-20ml urine is collected in a clean dry vial
- Analysed within 2hours of collection

In some cases 24hour urine sample is also collected

Types of specimens

- Random specimen (at any time)
- First morning specimen
- Clean catch sample (midstream urine)

Urinalysis look of :

A-physical Examination

1-Volume 2-Color 3-Odor 4-Reaction (pH)

5-Specific gravity

B-Chemical analysis

C-Microscopic Examination

A-physical Examination

1-Volume

- Adult urine volume= 0.6-2.5 L/day
average 1.5 L/day



- Children urine volume= 0.2-0.4 L/day

The volume of urine is affected by:

- 1) Water intake
- 2) External temperature
- 3) Type of diet
- 4) Mental and physical state
- 5) Cardio-Vascular status
- 6) Intake of fluid and diuretics (drugs, alcohol and tea)
- 7) Renal functions

*** Variations in volume of urine excreted**

A-Polyuria B-Oliguria C-Anuria

A-Polyuria

(Urine output > 2.5 L/day)

- **Conditions causing polyuria:**

- 1-Increased water ingestion
- 2-Diabetes mellitus and insipidus
- 3-Late stage of chronic glomerulonephritis
- 4-Drug induced-diuretics
- 5-Alcohol
- 6-Compulsive polydipsia

B-Oliguria

(Urine output < 0.4 L/day)

- **Conditions causing Oliguria:**

- 1-Fever
- 2-Diarrhea and Dehydration
- 3-Shock
- 4-Sever edema
- 5-Acute nephritis
- 6-Early stage of acute glomerulonephritis
- 7-Cardiac failure and hypotension (reduced circulatory volume)

2-Color

- The color of normal urine may vary from pale yellow to dark amber due to the presence of pigment surochrome ,urobilin and uroerythrin



- Turbidity may because by excessive cellular material or protein in the urine or may develop from crystallization
- Color of urine depending upon its constituents

• Variations in urinary abnormal colors:

Interpretation

Color

Very dilute urine (Diabetes and polyuria)

Colorless

Concentrated urine, Excess bile pigments and
Jaundice

Deep yellow

Carrots or Vitamin A

Orange

RBCs ,Myoglobin ,beetroot and menstrual
contamination

Red/smoky

Pseudomonas infection

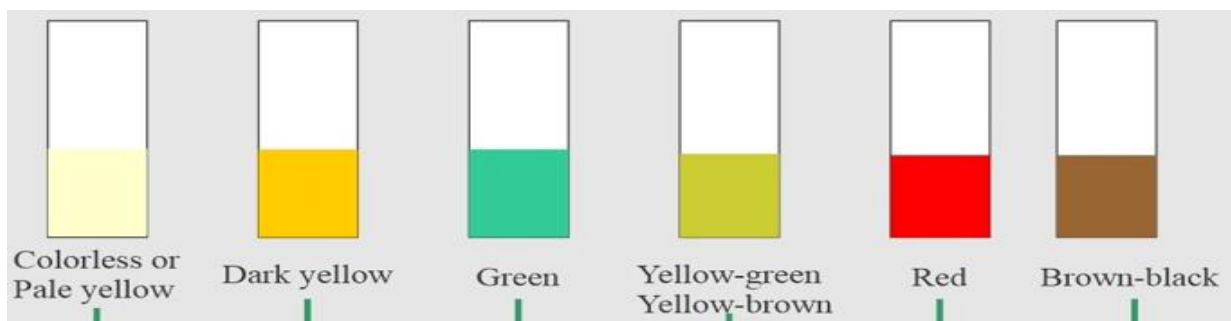
Blue-Green

Iron therapy

Black

Pus cells and bacteria

Cloudy



3-Odor

- Normal urine has an aromatic odor due to the volatile fatty acid.

Interpretation

Odor

On keeping sample for a long time

Ammonia



Due to bacterial infections	Foul or offensive
Due to acetone(Diabetic urine)	Fruity
Phenylketonuria	Mousy
Tyrosinaemia	Rancid

4-pH

- Urine pH range from 4.5 to 8
- Normally it is slightly acidic lying between 6-6.5
- **Acidic urine : seen in**
 - 1-Ketosis (such as diabetes, starvation and fever)
 - 2-Systemic acidosis
 - 3-Urinary tract infections (UTI)-E. coli
 - 4-Acidification therapy
- **Alkaline urine : seen in**
 - 1-Diet rich in citrus fruits
 - 2-Excessive intake of milk and antacids
 - 3-UTI
 - 4-Conditions of alkalosis

4-Specific gravity (SG)

- It is measurement of urine density which reflects the ability of the kidney to concentrate or dilute the urine relative to plasma from which it is filtered
- Measured by dipsticks
- The normal SG of urine ranges from 1.001to1.035



Normal urine

abnormal urine