

SJH CENTRE FOR LABORATORY MEDICINE & MOLECULAR PATHOLOGY			
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Acid containing 24 hour urine collection containers CONSENT FORM

NAME: _____ MRN: _____

ADDRESS: _____ D.O.B _____

Stick Addressograph here.

The following topics have been discussed with me:

The instructions to make a 24 hour urine collection. ☐

The plastic container contains corrosive acid (50% HCl) ☐

The danger associated with the strong Hydrochloric acid. ☐

I have received the instruction leaflet and understand the potential risk associated with this test.

PATIENT'S SIGNATURE: _____ DATE: _____

PLEASE PRINT NAME: _____

Instructor's SIGNATURE: _____ Grade: _____ DATE: _____

PLEASE FILE SIGNED FORM IN PATIENT'S CHART