

Person—microalbumin level (measured), albumin/creatinine ratio N[NN].N

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Person—microalbumin level (measured), albumin/creatinine ratio N[NN].N

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Microalbumin level—albumin/creatinine ratio (measured)
METEOR identifier:	270339
Registration status:	Health , Standard 01/03/2005
Definition:	A person's microalbumin level, measured as an albumin/creatinine ratio.
Data Element Concept:	Person—microalbumin level
Value Domain:	Albumin/creatinine ratio N[NN].N

Value domain attributes

Representational attributes

Representation class:	Ratio	
Data type:	Number	
Format:	N[NN].N	
Maximum character length:	4	
	Value	Meaning
Supplementary values:	999.9	Not stated/inadequately described
Unit of measure:	Milligram per millimole (mg/mmol)	

Data element attributes


Collection and usage attributes


Collection methods:	<p>Measurement of microalbumin levels should be carried out by laboratories, or practices, which have been accredited to perform these tests by the National Association of Testing Authority.</p> <p>Microalbumin is not detected by reagent strips for urinary proteins, and requires immunoassay.</p> <p>As urinary albumin varies with posture and exercise it is important to collect the urine under very standard conditions; short-term (2 hours) during rest, overnight (approximately 8 hours) or an early morning sample. For screening purposes an early morning urine specimen is adequate, and if the albumin/creatinine ratio is found to be greater than 3.5 mg/mmol then a timed overnight sample should be obtained for estimation of the albumin excretion rate.</p> <p>Test for albuminuria by measuring microalbumin in timed or first morning urine sample.</p> <p>The results considered elevated are</p> <ul style="list-style-type: none">• spot urine 30 to 300 mg/L; or• timed urine (24 hour collection) 20 to 200 µg/min.
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Source and reference attributes

Submitting organisation: National Diabetes Data Working Group
Origin: National Diabetes Outcomes Quality Review Initiative (NDOQRIN) data dictionary

Relational attributes

Related metadata references: Is re-engineered from  [Microalbumin - units, version 1, DE, NHDD, NHIMG, Superseded 01/03/2005.pdf](#) (16.3 KB)
No registration status

Is re-engineered from  [Microalbumin/protein - measured, version 1, DE, NHDD, NHIMG, Superseded 01/03/2005.pdf](#) (16.5 KB)
No registration status

See also [Laboratory standard—upper limit of normal range for microalbumin, albumin/creatinine ratio N\[NN\].N](#)
[Health](#), Standard 01/03/2005

Implementation in Data Set Specifications: [Diabetes \(clinical\) DSS](#)
[Health](#), Superseded 21/09/2005

DSS specific information:

A small amount of protein (albumin) in the urine (microalbuminuria) is an early sign of kidney damage. Microalbuminuria is a strong predictor of macrovascular disease and diabetic nephropathy. Incipient diabetic nephropathy can be detected by urine testing for microalbumin. Incipient diabetic nephropathy is suspected when microalbuminuria is detected in two of three samples collected over a six-month period in patients in whom other causes of an increased urinary album excretion have been excluded.

Diagnosis of microalbuminuria is established if 2 of the 3 measurements are abnormal.

According to the Principles of Care and Guidelines for the Clinical Management of Diabetes Mellitus a test for microalbuminuria is to be performed:

- at diagnosis and then every 12 months for patients with Type 2 diabetes,
- 5 years post diagnosis and then every 12 months for patients with Type 1 diabetes,
- if microalbuminuria is present, perform up to two additional measurements in the next 6 weeks.

[Diabetes \(clinical\) NBPDS](#)
[Health](#), Standard 21/09/2005

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