

Laboratory standard—upper limit of normal range for microalbumin, albumin/creatinine ratio N[NN].N

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Laboratory standard—upper limit of normal range for microalbumin, albumin/creatinine ratio N[NN].N

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Microalbumin level—upper limit of normal range (albumin/creatinine ratio)
Synonymous names:	Albumin/creatinine ratio
METEOR identifier:	270344
Registration status:	Health , Standard 01/03/2005
Definition:	The laboratory standard for the value of microalbumin measured as an albumin/creatinine ratio that is the upper boundary of the normal reference range.
Data Element Concept:	Laboratory standard—upper limit of normal range for microalbumin
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


Guide for use:	Record the upper limit of the microalbumin normal reference range for the laboratory.
Collection methods:	<p>Microalbumin is not detected by reagent strips for urinary proteins, and requires immunoassay.</p> <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>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 3.5mg/mmol then a timed overnight sample should be obtained for estimation of the albumin excretion rate.</p>

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Is re-engineered from  [Microalbumin - units, version 1, DE, NHDD, NHMG, Superseded 01/03/2005.pdf](#) (16.3 KB)

No registration status

Is re-engineered from  [Microalbumin - upper limit of normal range, version 1, DE, NHDD, NHMG, Superseded 01/03/2005.pdf](#) (15.8 KB)

No registration status

See also [Person—microalbumin level \(measured\), 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:

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 2 of 3 samples collected over a 6-month period in patients in whom other causes of an increased urinary albumin excretion have been excluded.

Diagnosis of microalbuminuria is established if 2 of the 3 measurements are abnormal. A small amount of protein (albumin) in the urine (microalbuminuria) is an early sign of kidney damage.

If microalbuminuria is present:

- review diabetes control and improve if necessary
- consider treatment with Angiotensin-converting enzyme (ACE) inhibitor
- consider referral to a physician experienced in the care of diabetic renal disease

If macroalbuminuria is present:

- quantitate albuminuria by measuring 24-hour urinary protein.
- refer to a physician experienced in the care of diabetic renal disease.

[Diabetes \(clinical\) NBPDS](#)

[Health](#), Standard 21/09/2005

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- quantify albuminuria by measuring 24-hour urinary protein.
- refer to a physician experienced in the care of diabetic renal disease.