



Color Atlas of the Urinary Sediment: An Illustrated Field Guide Based on Proficiency Testing (PUB219)

Errata: First printing

Page 66

Urinalysis in the Diagnosis of Urinary Tract Infection

Second paragraph.

Second sentence was: The standard for urinary tract infections of $>10^5$ CFU/mL of urine is based upon the work of Kass who, in 1955, demonstrated that over 95% of patients with pyelonephritis had bacteriuria levels of **less than** 10^5 CFU/mL of urine. This should be **greater than**.

Page 242

Ammonium/Magnesium Phosphate (Triple Phosphate)

Vital Statistics

pH was listed as between 6.2 and 7.0. pH should be 7.5 or greater.

Page 256

Calcium Oxalate

Vital Statistics

pH was listed as <5.4 . pH should be ≤ 7.0 .

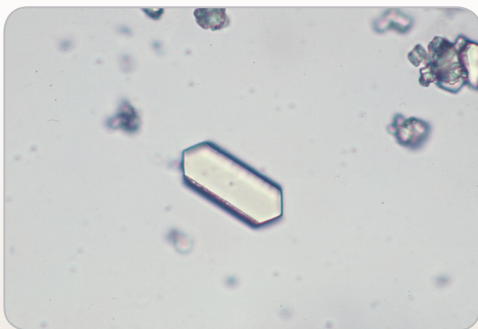
Page 289

Hippuric Acid

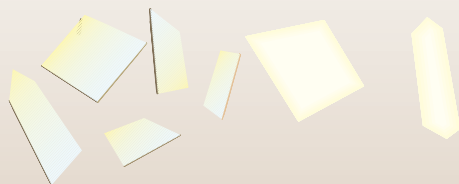
Distinguishing Hippuric Acid from Other Crystals

The graphic below contained some incorrect information on solubility. The information has been corrected.

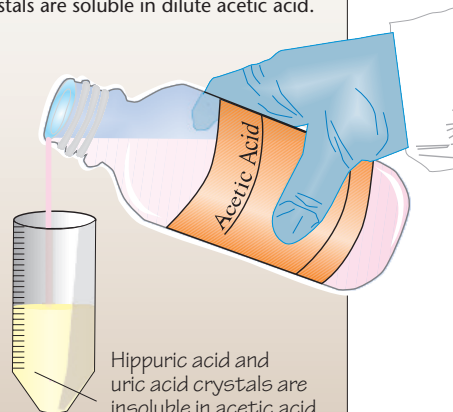
Distinguishing Hippuric Acid from Other Crystals



The crystal to the left is a uric acid crystal that mimics the elongated hexagon of a hippuric acid crystal or possibly a triple phosphate crystal. Additional tests are sometimes needed to separate them. Uric acid and hippuric acid are usually seen in acidic urine and triple phosphate in neutral or alkaline urine. Hippuric acid crystals are soluble in hot water, alkali, alcohol and ether. Uric acid crystals are soluble in hot water and 10% NaOH. Triple phosphate crystals are soluble in dilute acetic acid.



Hippuric acid crystals can mimic uric acid and triple phosphate crystals. Uric acid crystals, unlike hippuric acid, are insoluble in ether and are sparingly soluble in water.



Hippuric acid and uric acid crystals are insoluble in acetic acid, unlike triple phosphate crystals.