Peer Review File
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Reviewer Comments

Comment 1: Please state exactly when samples were certified - at the beginning, or at the end of the 24-hour collection.
Reply 1: We assume the reviewer meant acidified. Samples were acidified within 24 hours of the end of the 24-hour collection. This has now been added to the manuscript.

Comment 2: Why were the samples for oxalate measurements pre-treated with activated charcoal?
Reply 2: This was done according to the manufacturer's instructions/recommendations. This has been added to the manuscript.

Comment 3: Please describe the transportation conditions of samples to the referral laboratory.
Reply 3: Samples were sent to the referral laboratory at a refrigerated temperature with next-day delivery. This has been added to the manuscript.

Comment 4: Is the 10% cut-off for total error, arbitrary or is there a reference you are relying on?
Reply 4: The 10% cut-off for total error is based on our own internal quality goals for our laboratory. For all assays that we perform, these are based on a number of sources including accreditation requirements, biological variation, and in the case of citrate and oxalate, state of the art based on methodology. This has now been included in the manuscript.

Comment 5: Please indicate the coefficient of correlation (R2) for comparisons with the referral laboratory
Reply 5: The coefficient of correlation was 0.9810 for citrate and 0.9495 for oxalate. This has been added to the manuscript.

Comment 6: The Y axis of figures 3 and 4 need a legend. Additionally, it would be preferable to use the percent difference (PD%) as a unit for the Y axis, meaning the bias in relation to the result from Timepoint 0. (See Gomez-Rioja, R., et al. (2023). "Recommendation for the design of stability studies on clinical specimens." CCLM for more details,).
Reply 6: Thank you for this suggestion. The graphs have been changed to depict differences from the baseline.

Comment 7: For testing stability, it would have been preferable to use samples with high citrate and oxalate concentrations to evaluate potential crystallisations.
Reply 7: We agree with the reviewer completely that it would have been preferable to

use samples with higher concentrations for our stability study. However, we were limited by the patient samples we received that had sufficient volume to perform measurement for 14 days. We have added this as a limitation to the discussion.