



CK-MB/cTnI/Myo Fast Test Kit

(Immunofluorescence Assay)

User Manual

Getein1100: Cat.# IF1005
Getein1600: Cat.# IF2005

INTENDED USE

CK-MB/cTnI/Myo Fast Test Kit (Immunofluorescence Assay) is intended for *in vitro* quantitative determination of CK-MB/cTnI/Myo in serum, plasma or whole blood. This test is used as an aid in the clinical diagnosis, prognosis and evaluation of myocardial injury such as Acute Myocardial Infarction (AMI), Unstable Angina, Acute Myocarditis and Acute Coronary Syndrome (ACS).

SUMMARY

Creatine kinases are dimer isozymes composed of two monomer subunits, CK-M (for skeletal muscle derived) and CK-B (for brain derived), which can form all three combinations of monomers: CK-BB, CK-MM, and CK-MB. BB is found primarily in the brain. Skeletal muscles primarily contain the MM isoform, with trace amount of MB (around 1-4% of total CK activity). Cardiac muscles also contain the MM isoform, but higher amount of MB, typically around 20% of total CK activity. CK-MB is a more sensitive marker of myocardial injury than total CK activity, because it has a lower basal level and a much narrower normal range. Medical literatures commonly state that CK-MB levels are elevated in 4 to 6 hours, peak at 10 to 24 hours, and return to normal within 3 to 4 days after an acute myocardial infarction. Classically, an increase of the myocardial-specific enzyme CK-MB is considered as the hallmark of acute myocardial infarction, and increased levels are frequently interpreted by the clinician as objective evidence of myocardial cell damage.

Troponin complex consists of three regulatory proteins: T, which connects the troponin complex and tropomyosin (another

cardiac muscle regulatory protein); I, which prevents muscle contraction in the absence of calcium; and C, which binds calcium. Cardiac troponin I (MW 22.5 kDa) and the two skeletal muscle isoforms of troponin I have considerable amino acid sequence homology, but cTnI contains an additional N-terminal sequence and is highly specific for myocardia.

Clinical studies have demonstrated the release of cTnI into the blood stream within hours following acute myocardial infarctions (AMI) or ischemic damage. Elevated levels of cTnI are detectable in blood within 4 to 6 hours after the onset of chest pain, reaching peak concentrations in approximately 8 to 28 hours, and remain elevated for 3 to 10 days following AMI. Due to the high myocardial specificity and the long duration of elevation, cTnI has become an important marker in the diagnosis and evaluation of patients suspected of having an AMI.

Myoglobin is a small monomeric protein which serves as an intracellular oxygen storage site. It is found in abundance in the muscle and can get through into the blood circulation directly when myocardial cell is damaged mildly. Therefore, myoglobin has been advocated as a sensitive marker for early acute myocardial injury by American College of Cardiology Committee.

PRINCIPLE

Mixed monoclonal antibodies against human CK-MB, cTnI and Myo are conjugated with fluorescence latex and another set of anti-human CK-MB/cTnI/Myo monoclonal antibodies were coated on different test lines respectively. After the sample has been applied to the test strip, the fluorescence latex-labelled anti-human CK-MB, cTnI and Myo monoclonal antibodies will bind with the CK-MB, cTnI and Myo in sample respectively and form marked antigen-antibody complexes. These complexes move to the test card detection zone by capillary action. Then marked antigen-antibody complexes will be captured on different test lines by another set of monoclonal antibodies against human CK-MB, cTnI or Myo respectively resulting in the accumulation of fluorescence particles on the test lines. The fluorescence intensity of each test line increases in proportion to the amount of CK-MB, cTnI or Myo in sample. Then insert test card into Getein1100 Immunofluorescence Quantitative Analyzer/Getein1600 Immunofluorescence Quantitative Analyzer (hereinafter referred to as Getein1100 and Getein1600), the concentration of CK-MB, cTnI and Myo

in sample will be measured and displayed on the screen. The value will be stored in Getein1100/Getein1600 and available for downloading. The result can be easily transmitted to LIS and HIS.

CONTENTS

- A kit for Getein1100 contains:

Getein CK-MB/cTnI/Myo test card in a sealed pouch with desiccant	25
Disposable pipet	25
Whole blood buffer	1
SD card	1
User manual	1
- A kit for Getein1600 contains:

Sealed cartridge with 24/48 Getein CK-MB/cTnI/Myo test cards	2
User manual	1
<u>Package specifications:</u>	
2×24 tests/kit, 2×48 tests/kit	
<u>Materials required for Getein1600:</u>	
Sample diluent	1
Box with pipette tips	1
Mixing plate	1
- Sample diluent/Whole blood buffer composition:

Phosphate buffered saline, proteins, detergent, preservative, stabilizer.
- A test card consists of:

A plastic shell and a reagent strip which is composed of a sample pad, nitrocellulose membrane (one end of the membrane is coated with fluorescence latex-labelled anti-human CK-MB, cTnI and Myo monoclonal antibodies, these three lines are coated with another anti-human CK-MB, another anti-human cTnI and another anti-human Myo monoclonal antibody, respectively. and the control line C is coated with rabbit anti-mouse IgG antibody), absorbent paper and liner.

Note: Do not mix or interchange different batches of kits.

APPLICABLE DEVICE

Getein1100 Immunofluorescence Quantitative Analyzer

Getein1600 Immunofluorescence Quantitative Analyzer

STORAGE AND STABILITY

Store the test card at 4~30°C with a valid period of 24 months. Use the test card for Getein1100 within 1 hour once the foil pouch is opened.

For test card of Getein1600: if the cartridge is opened, it could be stable within 24 hours once exposed to air. If the test cards can't be used up at a time, please put the cartridge back to the foil pouch and reseal along the entire edge of zip-seal. The remaining test cards should be used up within 7 days.

Store the sample diluent/whole blood buffer at 0~30°C with a valid period of 24 months.

Store the sample diluent/whole blood buffer at 2~8°C for better results.

PRECAUTIONS

- For *in vitro* diagnostic use only.
- For professional use only.
- Do not use the kit beyond the expiration date.
- Do not use the test card if the foil pouch or the cartridge is damaged.
- Do not open pouches or the cartridge until ready to perform the test.
- Do not reuse the test card.
- Do not reuse the pipet.
- Handle all specimens as potentially infectious. Proper handling and disposal methods should be followed in accordance with local regulations.
- Carefully read and follow user manual to ensure proper test performance.

SPECIMEN COLLECTION AND PREPARATION

- This test can be used for *serum, plasma and whole blood samples*. *Heparin and sodium citrate* should be used as the anticoagulant for plasma and whole blood. Samples should be free of hemolysis.
- Suggest using serum or plasma for better results.
- Serum or plasma can be used directly. For whole blood sample, one drop of whole blood buffer must be added before testing.
- If testing will be delayed, serum and plasma samples may

- be stored up to 7 days at 2~8°C or stored at -20°C for 6 months before testing (whole blood sample may be stored up to 3 days at 2~8°C).
5. Refrigerated or frozen sample should reach room temperature and be homogeneous before testing. Avoid multiple freeze-thaw cycles.
6. Do not use heat-inactivated samples.
7. **SAMPLE VOLUME (for Getein1100): 100 µl.**

TEST PROCEDURE

1. Collect specimens according to user manual.
2. Test card, sample and reagent should be brought to room temperature before testing.

For Getein1100:

3. Confirm SD card lot No. in accordance with test kit lot No.. Perform "SD Card Calib" calibration when necessary (Details refer to 8.5.2 of Getein1100 User Manual).
4. On the main interface of Getein1100, press "ENT" button to enter testing interface.
5. Remove the test card from the sealed pouch immediately before use. Label the test card with patient or control identification.
6. Put the test card on a clean table, horizontally placed.
7. Using sample transfer pipette, deliver **100 µl** of sample (or 3~4 drops of sample when using disposable pipet) into the sample port on the test card (for whole blood sample, one drop of whole blood buffer must be added after loading 100 µl sample on the test card).
8. **Reaction time: 15 minutes.** Insert the test card into Getein1100 and press "ENT" button after reaction time is elapsed. The result will be shown on the screen and printed automatically.

For Getein1600:

9. Each cartridge for Getein1600 contains a specific RFID card which can calibrate automatically.
10. Place samples in the designed area of the sample holder, insert the holder and select the right test item, Getein1600 will do the testing and print the result automatically.

Notes:

1. It is required to perform "SD Card Calib" calibration when using a new batch of kits.
2. It is suggested to calibrate once for one batch of kits for Getein1100.

3. Make sure the test card and the sample insertion is correct and complete.

TEST RESULTS

Getein1100/Getein1600 can scan the test card automatically and display the result on the screen. For additional information, please refer to the user manual of Getein1100/Getein1600.

EXPECTED VALUE

The expected normal value for CK-MB was determined by testing samples from 500 apparently healthy individuals. The 99th percentile of the concentration for CK-MB is 5.0 ng/ml. (The probability that value of a normal person below 5.0 ng/ml is 99%.)

The expected normal value for cTnI was determined by testing samples from 500 apparently healthy individuals. The 99th percentile of the concentration for cTnI is 0.1 ng/ml. (The probability that value of a normal person below 0.1 ng/ml is 99%.)

The expected normal value for Myo was determined by testing samples from 500 apparently healthy individuals. The 95th percentile of the concentration for Myo is 50 ng/ml. The 97.5th percentile of the concentration for Myo is 70 ng/ml. (According to different Statistics method, the probability that value of a normal person below 50 ng/ml is 95% or below 70 ng/ml is 97.5%.)

It is recommended that each laboratory establish its own expected values for the population it serves.

PERFORMANCE CHARACTERISTICS

	CK-MB	cTnI	Myo
Measuring Range	2.5~80,0 ng/ml	0.1~50,0 ng/ml	30,0~600,0 ng/ml
Lower Detection Limit	≤ 2.5 ng/ml	≤ 0.1 ng/ml	≤ 30.0 ng/ml
Within-Run Precision	≤10%		
Between-Run Precision	≤15%		

Method Comparison:

The assay was compared with HITACHI 7600/OLYMPUS AU5400 and its matching CK-MB test kits, SIEMENS IMMULITE 1000/2000 and its matching cTnI and Myo test kits with 200

serum samples (60 positive samples and 140 negative samples). The correlation coefficient (r) for CK-MB is 0.928, the correlation coefficient (r) for cTnI is 0.952, the correlation coefficient (r) for Myo is 0.938.

LIMITATIONS

1. As with all diagnostic tests, a definitive clinical diagnosis should not be made based on the result of a single test. The test results should be interpreted considering all other test results and clinical information such as clinical signs and symptoms.
2. Samples containing interferences may influence the results. The table below listed the maximum allowance of these potential interferences.

Interferent	Hemoglobin	Triglyceride	Bilirubin
Concentration (Max)	5 g/L	10 g/L	0.2 g/L

REFERENCES

1. Mauro Pantaghini; Undefined International Federation of Clinical Chemistry and Laboratory Medicine (IFCC). Scientific Division Committee on Standardization of Markers of Cardiac Damage. Clin Chem Lab Med,1998, 36:887~893.
2. Antman EM, Anbe DT, Armstrong PW, et al. ACC/AHA guidelines for the management of patients with ST-elevation myocardial infarction: a report of the American College of Cardiology/American Heart Association Task Force on Practice Guidelines (Committee to Revise the 1999 Guidelines for the Management 2004).
3. EN ISO 18113-1:2009 *In vitro* diagnostic medical devices - Information supplied by the manufacturer (labelling) - Part 1: Terms, definitions and general requirements.
4. EN ISO 18113-2:2009 *In vitro* diagnostic medical devices - Information supplied by the manufacturer (labelling) - Part 2: *In vitro* diagnostic reagents for professional use (ISO 18113-2:2009).

DESCRIPTION OF SYMBOLS USED

The following graphical symbols used in or found on CK-MB/cTnI/Myo Fast Test Kit (Immunofluorescence Assay) are the

most common ones appearing on medical devices and their packaging. They are explained in more details in the European Standard EN 980:2008 and International Standard ISO 15223-1:2007.

Key to symbols used			
	Manufacturer		Expiration date
	Do not reuse		Date of manufacture
	Consult instructions for use		Batch code
	Temperature limitation		<i>In vitro</i> diagnostic medical device
	Sufficient for		Authorized representative in the European Community
	CE mark		Do not use if package is damaged

Thank you for purchasing CK-MB/cTnI/Myo Fast Test Kit (Immunofluorescence Assay). Please read this user manual carefully before operating to ensure proper use.

Version: WIF09-S-02



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CK-MB/cTnI/Myo Control

REF QC016

User Manual

PRODUCT NAME

CK-MB/cTnI/Myo Control

PRODUCT SPECIFICATION

Package: 3(Level)*2(Vial)*1(ml), 3(Level)*1(Vial)*1(ml)

CK-MB/cTnI/Myo Control - Level 1/2/3

INTENDED USE

This product is intended for *in vitro* diagnostic use in the quality control of CK-MB/cTnI/Myo on the Getein Platforms.

PRINCIPLE

The lyophilized CK-MB/cTnI/Myo control is prepared from dissolving stable and high quality recombinant CK-MB/cTnI/Myo antigen into calf serum. With matching equipments and reagents, it can fulfill value transfer work. As different equipments and reagents have uncertainty to some extent, different control results may appear.

CONTENTS

The kit for FIA8000/FIA8600/Getein1100 contains:

1. CK-MB/cTnI/Myo Control - Level 1
CK-MB/cTnI/Myo Control - Level 2
CK-MB/cTnI/Myo Control - Level 3
2. User manual: 1 piece/box

3. Target value sheet: 1 piece/box

The kit for Getein1600 contains:

1. CK-MB/cTnI/Myo Control - Level 1
CK-MB/cTnI/Myo Control - Level 2
CK-MB/cTnI/Myo Control - Level 3
2. User manual: 1 piece/box
3. Quality control holder - Level 1
Quality control holder - Level 2
Quality control holder - Level 3

Note: Each quality control holder is labelled with barcode which contains target value and level of different items.

MATCHING EQUIPMENTS

FIA8000/8600 Quantitative Immunoassay Analyzer

Getein1100/1600 Immunofluorescence Quantitative Analyzer

STORAGE AND STABILITY

UNOPENED: The product is stable for 18 months at -20°C and for 30 days at 2 ~ 8°C to avoid light.

OPENED: The product is stable for 7 days at 2 ~ 8°C if kept capped in original container and free from contamination. Only the required amount of product should be removed. Any residual product should NOT BE RETURNED to the original vial after using. It is recommended to be dispensed into smaller vials after dilution and stable for 30 days at -20 ~ -70°C.

MATERIALS REQUIRED BUT NOT PROVIDED

1. 1 ml pipette
2. Distilled water
3. Getein test kit
4. Getein instrument

TEST PROCEDURE

1. The product should be brought to room temperature (15 ~ 30°C) prior to use.
2. Open the vial carefully in case of the loss of content.

3. Dissolve each control material with 1 ml distilled water.
4. Gently mix until all material has dissolved. Avoid violent shaking.
5. Keep it at room temperature for 5 ~ 10 minutes before use.
For FIA8000/FIA8600/Getein1100:

6. Treat the control in the same manner as patient specimen in the assay procedure. Follow the directions of test kit and the instrument application instruction.

For Getein1600:

7. Match each vial with corresponding quality control holder.
8. Insert quality control holder into sample holder.
9. Insert sample holder with a constant speed and barcode facing the scanner, refer to the User Manual of Getein1600 to start QC testing.

ASSIGNED VALUES

Refer to values listed on the target value sheet.

If the result is beyond the range, it indicates the existence of some unreliable factors in the testing system. Referring to the control graph helps judge the accuracy and stability of the testing system.

The expected range of the mean is provided to aid laboratory until it has established its own mean and SD for its methods.

PERFORMANCE CHARACTERISTICS

1. Homogeneity: $\leq 15\%$
2. Accuracy range: Refer to the target value sheet

LIMITATIONS

1. This product can only be used on the Getein Platforms.
2. Variation exists between different equipments developed by different methods even using the same control product.
3. This product is not intended to be used as standard material.

NOTES

1. For *in vitro* diagnostic use only.
2. Do not use the product beyond the expiration date.
3. Avoid multiple freeze-thaw cycles.

4. Do not use the product if it is contaminated with bacteria.
5. Proper handling and disposal methods should be followed in accordance with local regulations.

DESCRIPTION OF SYMBOLS USED

The following graphical symbols used in or found on CK-MB/cTnI/Myo control are the most common ones appearing on medical devices and their packaging. They are explained in more details in the European Standard EN 980:2008 and EN ISO15223-1:2016.

Key to symbols used			
	Manufacturer		Expiration date
	Catalogue number		Date of manufacture
	Consult instructions for use		Batch code
	Temperature limitation		<i>In vitro</i> diagnostic medical device
	Sufficient for		Biological risk
	CE mark		Authorized representative in the European Community

Thank you for purchasing CK-MB/cTnI/Myo Control.

Please read this user manual carefully before operating to ensure proper use.

Version: WZK15-S-02



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D-Dimer

Fast Test Kit

(Immunofluorescence Assay)

User Manual



IF1006 for Getein1100
IF2006 for Getein1600

INTENDED USE

D-Dimer Fast Test Kit (Immunofluorescence Assay) is intended for *in vitro* quantitative determination of D-Dimer in human plasma or whole blood samples. The test is used as an aid in the assessment and evaluation of patients suspected of deep-vein thrombosis or pulmonary embolism.

SUMMARY

Deep-vein thrombosis is a common condition, with a lifetime cumulative incidence of 2 to 5 percent. Untreated deep-vein thrombosis can result in pulmonary embolism, a potentially fatal outcome. Anticoagulant therapy reduces both morbidity and mortality from venous thromboembolism, and early diagnosis is therefore important. Accurate diagnosis of deep-vein thrombosis minimizes the risk of thromboembolic complications and averts the exposure of patients without thrombosis to the risks of anticoagulant therapy.

D-Dimer is a marker of endogenous fibrinolysis and should therefore be detectable in patients with deep-vein thrombosis. In recent years, an increasing number of studies have shown the D-Dimer assay has a high negative predictive value and D-Dimer is a sensitive but nonspecific marker of deep-vein thrombosis. Negative D-Dimer can exclude deep-vein thrombosis and pulmonary embolism.

PRINCIPLE

The test uses an anti-human D-Dimer monoclonal antibody conjugated with fluorescence latex and another anti-human D-Dimer monoclonal antibody coated on the test line. After the sample has been applied to the test strip, the fluorescence latex-labelled anti-human D-Dimer monoclonal antibody binds with the D-Dimer in sample and forms a marked antigen-antibody

complex. This complex moves to the test card detection zone by capillary action. Then marked antigen-antibody complex is captured on the test line by another anti-human D-Dimer monoclonal antibody. The fluorescence intensity of the test line increases in proportion to the amount of D-Dimer in sample. Then insert test card into Getein1100 Immunofluorescence Quantitative Analyzer/Getein1600 Immunofluorescence Quantitative Analyzer (hereinafter referred to as Getein1100 and Getein1600), the concentration of D-Dimer in sample will be measured and displayed on the screen. The value will be stored in Getein1100/Getein1600 and available for downloading. The result can be easily transmitted to the laboratory or hospital information system.

CONTENTS

1. A kit for Getein1100 contains:

Package specifications: 25 tests/box, 10 tests/box

- 1) D-Dimer test card in a sealed pouch with desiccant
- 2) Disposable pipet
- 3) Sample diluent
- 4) User manual: 1 piece/box
- 5) SD card: 1 piece/box

2. A kit for Getein1600 contains:

Package specifications: 2×24 tests/kit, 2×48 tests/kit

- 1) Sealed cartridge with 24/48 Getein D-Dimer test cards
 - 2) User manual: 1 piece/box
- Materials required for Getein1600:

- 1) Sample diluent: 1 bottle/box
- 2) Box with pipette tips: 96 tips/box
- 3) Mixing plate: 1 piece/box

3. Sample diluent composition:

Phosphate buffered saline, proteins, detergent, preservative, stabilizer.

4. A test card consists of:

A plastic shell and a reagent strip which is composed of a sample pad, nitrocellulose membrane (one end of the membrane is coated with a fluorescence latex-labelled anti-human D-Dimer monoclonal antibody, the test line is coated with another anti-human D-Dimer monoclonal antibody and the control line is coated with rabbit anti-mouse IgG antibody), absorbent paper and liner.

Note: Do not mix or interchange different batches of kits.

APPLICABLE DEVICE

Getein1100 Immunofluorescence Quantitative Analyzer

Getein1600 Immunofluorescence Quantitative Analyzer

STORAGE AND STABILITY

Store the test card at 4–30°C with a valid period of 24 months. Use the test card for Getein1100 within 1 hour once the foil pouch is opened.

For test card of Getein1600: if the cartridge is opened, it could be stable within 24 hours once exposed to air. If the test cards can't be used up at a time, please put the cartridge back to the foil pouch and reseal along the entire edge of zip-seal. The remaining test cards should be used up within 7 days.

Store the sample diluent at 0–30°C with a valid period of 24 months.

Store the sample diluent at 2–8°C for better results.

PRECAUTIONS

1. For *in vitro* diagnostic use only.
2. Do not use the kit beyond the expiration date.
3. Do not use the test card if the foil pouch or the cartridge is damaged.
4. Do not open pouches or the cartridge until ready to perform the test.
5. Do not reuse the test card.
6. Do not reuse the pipet.
7. Handle all specimens as potentially infectious. Proper handling and disposal methods should be followed in accordance with local regulations.
8. Carefully read and follow user manual to ensure proper test performance.

SPECIMEN COLLECTION AND PREPARATION

1. This test can be used for **plasma and whole blood samples**. **Sodium citrate** can be used as the anticoagulant for plasma and whole blood. Samples should be free of hemolysis.
2. Suggest using plasma for better results.
3. If testing is delayed, plasma sample may be stored up to 3 days at 2–8°C or stored at -20°C for 1 month before testing (whole blood sample may be stored up to 3 days at 2–8°C).
4. Refrigerated or frozen sample should reach room temperature and be homogeneous before testing. Avoid multiple freeze-thaw cycles.
5. Do not use heat-inactivated samples.
6. **SAMPLE VOLUME (for Getein1100): 100 µl.**

TEST PROCEDURE

1. Collect specimens according to user manual.
2. Test card, sample and reagent should be brought to room temperature before testing.

For Getein1100:

3. Confirm SD card lot No. in accordance with test kit lot No.. Perform "SD card" calibration when necessary.
4. Remove the test card from the sealed pouch immediately before use. Label the test card with patient or control identification.
5. Put the test card on a clean table, horizontally placed.
6. Using sample transfer pipette, deliver **100 µl** of sample into one tube of sample diluent, mix gently and thoroughly. Then drop **100 µl** of sample mixture into the sample port on the test card.
7. **Reaction time: 10 minutes.** Insert the test card into Getein1100 and press "ENT" button or click on "Start" icon (for Android Getein 1100) after reaction time is elapsed. The result will be shown on the screen and printed automatically.

For Getein1600:

8. Each cartridge for Getein1600 contains a specific RFID card which can calibrate automatically.
9. Place the sample diluent at the correct position in Getein16-00.
10. Place samples in the designed area of the sample holder, insert the holder and select the right test item. Getein1600 will do the testing and print the result automatically.

Notes:

1. It is required to perform "SD card" calibration when using a new batch of kits for Getein1100.
2. It is suggested to calibrate once for one batch of kits for Getein1100.
3. Make sure the test card and the sample insertion is correct and complete.

TEST RESULTS

Getein1100/Getein1600 can scan the test card automatically and display the result on the screen. For additional information, please refer to the user manual of Getein1100/Getein1600.

EXPECTED VALUE

The expected normal value for D-Dimer was determined by testing samples from 500 apparently healthy individuals. The 95th percentile of the concentration for D-Dimer is 0.50 mg/L. (The probability that value of a normal person below 0.50 mg/L

is 95%.)

It is recommended that each laboratory establish its own expected values for the population it serves.

PERFORMANCE CHARACTERISTICS

Measuring Range	0.10~10.00 mg/L
Lower Detection Limit	≤0.10 mg/L
Within-Run Precision	≤10%
Between-Run Precision	≤15%

Method Comparison:

The assay was compared with Sysmex CA7000 and SIEMENS Solutions Diagnostics D-Dimer Plus with 200 plasma samples. The correlation coefficient (r) for D-Dimer is 0.978.

LIMITATIONS

1. As with all diagnostic tests, a definitive clinical diagnosis should not be made based on the result of a single test. The test results should be interpreted considering all other test results and clinical information such as clinical signs and symptoms.
2. Samples containing interferents such as rheumatoid factor, human anti-mouse antibody and heterophile antibody may influence the results. In this case, results of this test should be used in conjunction with clinical findings and other tests. The table below listed the maximum allowance of these potential interferents.

Interferent	Hemoglobin	Triglyceride	Bilirubin
Concentration (Max)	5 g/L	25 g/L	0.1 g/L

REFERENCES

1. Sarig G, Kilil-Drori AJ, Chap-Marshak D, Brenner B, Drugan A. Activation of coagulation in amniotic fluid during normal human pregnancy. *Thromb Res.* 2011 Apr 18.
2. Roldán V, Marín F, Muñia B, Torregrosa JM, Hernández-Romero D, Valdés M, Vicente V, Lip GY. Plasma von Willebrand Factor Levels Are an Independent Risk Factor for Adverse Events Including Mortality and Major Bleeding in Anticoagulated Atrial Fibrillation Patients. *J Am Coll Cardiol.* 2011 Apr 11.
3. Sakamoto K, Yamamoto Y, Okamatsu H, Okabe M. D-dimer is helpful for differentiating acute aortic dissection and acute pulmonary embolism from acute myocardial infarction. *Hellenic J Cardiol.* 2011 Mar-Apr; 52(2):123-127.
4. EN ISO 18113-1:2011 In vitro diagnostic medical devices -

Information supplied by the manufacturer (labelling) - Part

1: Terms, definitions and general requirements.

5. EN ISO 18113-2:2011 In vitro diagnostic medical devices - Information supplied by the manufacturer (labelling) - Part 2: In vitro diagnostic reagents for professional use.

DESCRIPTION OF SYMBOLS USED

The following graphical symbols used in or found on D-Dimer Fast Test Kit (Immunofluorescence Assay) are the most common ones appearing on medical devices and their packaging. They are explained in more details in the European Standard EN ISO 15223-1:2016/ISO 15223-1:2016.

Key to symbols used			
	Manufacturer		Use-by date
	Do not re-use		Date of manufacture
	Consult instructions for use		Batch code
	Temperature limit		In vitro diagnostic medical device
	Contains sufficient for <n> tests		Authorized representative in the European Community
	CE mark		Do not use if package is damaged
	Catalogue number		

Thank you for purchasing D-Dimer Fast Test Kit (Immunofluorescence Assay). Please read this user manual carefully before operating to ensure proper use.

Version: WIF05-S-07



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D-Dimer Control

REF QC006

User Manual

PRODUCT NAME

D-Dimer Control

PRODUCT SPECIFICATION

Package: 3(Level)*2(Vial)*1(ml), 3(Level)*1(Vial)*1(ml)
D-Dimer Control - Level 1/2/3

INTENDED USE

This product is intended for *in vitro* diagnostic use in the quality control of D-Dimer on the Getein Platforms.

PRINCIPLE

The lyophilized D-Dimer control is prepared from dissolving stable and high quality recombinant D-Dimer antigen into calf serum. With matching equipments and reagents, it can fulfill value transfer work. As different equipments and reagents have uncertainty to some extent, different control results may appear.

CONTENTS

The kit for FIA8000/FIA8600/Getein1100 contains:

1. D-Dimer Control - Level 1
D-Dimer Control - Level 2
D-Dimer Control - Level 3
2. User manual: 1 piece/box
3. Target value sheet: 1 piece/box

The kit for Getein1600 contains:

1. D-Dimer Control - Level 1
D-Dimer Control - Level 2
D-Dimer Control - Level 3
2. User manual: 1 piece/box
3. Target value sheet: 1 piece/box
4. Quality control holder - Level 1
Quality control holder - Level 2
Quality control holder - Level 3

Note: Each quality control holder is labelled with barcode which contains target value and level of different items.

MATCHING EQUIPMENTS

FIA8000/8600 Quantitative Immunoassay Analyzer
Getein1100/1600 Immunofluorescence Quantitative Analyzer

STORAGE AND STABILITY

UNOPENED: The product is stable for 18 months at -20°C and for 90 days at 2 ~ 8°C to avoid light.

OPENED: The product is stable for 15 days at 2 ~ 8°C if kept capped in original container and free from contamination. Only the required amount of product should be removed. Any residual product should NOT BE RETURNED to the original vial after using. It is recommended to be dispensed into smaller vials after dilution and stable for 30 days at -20 ~ -70°C.

MATERIALS REQUIRED BUT NOT PROVIDED

1. 1 ml pipette
2. Distilled water
3. Getein test kit
4. Getein instrument

TEST PROCEDURE

1. The product should be brought to room temperature (15 ~ 30°C) prior to use.
2. Open the vial carefully in case of the loss of content.

3. Dissolve each control material with 1 ml distilled water.
4. Close the vial and mix gently until all contents are dissolved completely. Avoid violent shaking or foam formation.
5. Keep it at room temperature for 5 ~ 10 minutes before use.
For FIA8000/FIA8600/Getein1100:

6. Treat the control in the same manner as patient specimen in the assay procedure. Follow the directions of test kit and the instrument application instruction.

For Getein1600:

7. Insert quality control holder into sample holder.
8. Insert sample holder with a constant speed and barcode facing the scanner, refer to the User Manual of Getein1600 to start QC testing.

ASSIGNED VALUES

Refer to values listed on the target value sheet.

If the result is beyond the range, it indicates the existence of some unreliable factors in the testing system. Referring to the control graph helps judge the accuracy and stability of the testing system.

The expected range of the mean is provided to aid laboratory until it has established its own mean and SD for its methods.

PERFORMANCE CHARACTERISTICS

1. Homogeneity: $\leq 15\%$
2. Accuracy range: Refer to the target value sheet

LIMITATIONS

1. This product can only be used on the Getein Platforms.
2. Variation exists between different equipments developed by different methods even using the same control product.
3. This product is not intended to be used as standard material.

NOTES

1. For *in vitro* diagnostic use only.
2. Do not use the product beyond the expiration date.
3. Avoid multiple freeze-thaw cycles.
4. Do not use the product if it is contaminated with bacteria.

5. Proper handling and disposal methods should be followed in accordance with local regulations.

DESCRIPTION OF SYMBOLS USED

The following graphical symbols used in or found on D-Dimer control are the most common ones appearing on medical devices and their packaging. They are explained in more details in the European Standard EN 980:2008 and EN ISO15223-1:2016.

Key to symbols used			
	Manufacturer		Expiration date
	Catalogue number		Date of manufacture
	Consult instructions for use		Batch code
	Temperature limitation		<i>In vitro</i> diagnostic medical device
	Sufficient for		Biological risk
	CE mark		Authorized representative in the European Community

Please read this user manual carefully before operating to ensure proper use.

Version: WZK04-S-04



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HCG+β Fast Test Kit

(Immunofluorescence Assay)

Getein1100: Cat.# IF1013

Getein1600: Cat.# IF2013

User Manual

INTENDED USE

HCG+β Fast Test Kit (Immunofluorescence Assay) is intended for *in vitro* quantitative determination of human chorionic gonadotropin (HCG) in serum or plasma. This test is used as an aid in pregnancy test.

SUMMARY

Human chorionic gonadotropin (HCG) is a glycoprotein hormone produced by the placenta, a component of the fertilized egg, after conception. The biologically active hormone (intact HCG) is composed of noncovalently linked α and β subunit. The alpha subunit is similar to hormone (LH), follicle-stimulating hormone (FSH), thyroid-stimulating hormone (TSH), whereas beta subunits is unique to HCG and confers its biological and immunological specificity. During a normal pregnancy, HCG level can be detected soon after conception. It will double every 72 hours and reach its peak in the first 8~11 weeks of pregnancy. HCG measurement with blood or urine can be used as an aid in pregnancy test. Regular HCG has been known as a promoter of corpus luteal progesterone production, even though this function only explains 3 weeks of a full gestations production of regular HCG. HCG-positive indicates an implanted blastocyst and mammalian embryogenesis. Elevated values of HCG during pregnancy are indicative of chorionic carcinoma, hydatiform mole, or multiple pregnancy. HCG+β measurements can also be used in conjunction with other parameters during the second trimester of pregnancy to assess the risk of trisomy 21 (Down syndrome).

PRINCIPLE

The test based on the principle of sandwich immunoassay and competitive immunoassay together. The test uses two anti-human β-HCG monoclonal antibodies and a β-HCG recombinant antigen. One monoclonal antibody is coated on the sample pad, the other monoclonal antibody and β-HCG recombinant antigen are coated on the detection zone. After the sample has

been applied to the test strip, the fluorescence latex-labelled anti-human β-HCG monoclonal antibody binds with the HCG and β-HCG in sample and forms an antigen-antibody complex. The complex moves to the test card detection zone by capillary action. In the dection zone, marked antigen-antibody complex will be captured on the test line by another set of monoclonal antibody against human β-HCG, meanwhile, HCG and β-HCG in the sample will compete with β-HCG recombinant antigen on nitrocellulose matrix for fluorescence latex-labelled anti-human β-HCG monoclonal antibody. Then insert test card into Getein1100 Immunofluorescence Quantitative Analyzer/Getein1600 Immunofluorescence Quantitative Analyzer (hereinafter referred to as Getein1100 and Getein1600), the concentration of HCG and β-HCG in sample will be measured and displayed on the screen. The value will be stored in Getein1100/Getein1600 and available for downloading. The result can be easily transmitted to the laboratory or hospital information system.

CONTENTS

1. A kit for Getein1100 contains:

Getein HCG+β test card in a sealed pouch with desiccant	25
Disposable pipet	25
Whole blood buffer	1
SD card	1
User manual	1

2. A kit for Getein1600 contains:

Sealed cartridge with 24/48 Getein HCG+β test cards ..	2
User manual	1

Package specifications:

2×24 tests/kit, 2×48 tests/kit	
<u>Materials required for Getein1600:</u>	
Sample diluent	1
Box with pipette tips	1
Coated wells	1

3. Sample diluent/Whole blood buffer composition:

Phosphate buffered saline, proteins, detergent, preservative, stabilizer.

4. A test card consists of:

A plastic shell and a reagent strip which is composed of a sample pad, nitrocellulose membrane (one end of the membrane is coated with a fluorescence latex-labelled anti-human β-HCG monoclonal antibody, the test line is coated with another anti-human β-HCG monoclonal antibody and β-HCG recombinant antigen, and the control line is coated with rabbit anti-mouse IgG antibody), absorbent paper and liner.

Note: Do not mix or interchange different batches of kits.

APPLICABLE DEVICE

Getein1100 Immunofluorescence Quantitative Analyzer
Getein1600 Immunofluorescence Quantitative Analyzer

STORAGE AND STABILITY

Store the test card at 4~30°C with a valid period of 24 months. Use the test card for Getein1100 within 1 hour once the foil pouch is opened.

Use the test card for Getein 1600 within 7 days once opened. Store the sample diluent/whole blood buffer at 0~30°C with a valid period of 24 months.

Store the sample diluent/whole blood buffer at 2~8°C for better results.

PRECAUTIONS

1. For *in vitro* diagnostic use only.
2. For professional use only.
3. Do not use the kit beyond the expiration date.
4. Do not use the test card if the foil pouch or the cartridge is damaged.
5. Do not open pouches or the cartridge until ready to perform the test.
6. Do not reuse the test card.
7. Do not reuse the pipet.
8. Handle all specimens as potentially infectious. Proper handling and disposal methods should be followed in accordance with local regulations.
9. Carefully read and follow user manual to ensure proper test performance.

SPECIMEN COLLECTION AND PREPARATION

1. This test can be used for *serum, plasma, whole blood. Heparin and sodium citrate* should be used as the anticoagulant for plasma and whole blood sample. Samples should be free of hemolysis.
2. If testing will be delayed, serum and plasma samples may be stored up to 5 days at 2~8°C or stored at -20°C for 6 months before testing.
3. Refrigerated or frozen sample should reach room temperature and be homogeneous before testing. Avoid multiple freeze-thaw cycles.
4. Do not use heat-inactivated samples.
5. SAMPLE VOLUME (*for Getein1100*): 100 μl.

TEST PROCEDURE

1. Collect specimens according to user manual.

2. Test card, sample should be brought to room temperature before testing.

For Getein1100:

3. Confirm "SD Card lot No. in accordance with test kit lot No., Perform "SD Card Calib" calibration when necessary (Details refer to 8.5.2 of Getein1100 User Manual).

4. On the main interface of Getein1100, press "ENT" button to enter testing interface.

5. Remove the test card from the sealed pouch immediately before use. Label the test card with patient or control identification.

6. Put the test card on a clean table, horizontally placed.

7. Using sample transfer pipette, deliver 100 µl of sample (or 3-4 drops of sample when using disposable pipet) into the reaction port on the test card.

8. **Reaction time: 10 minutes**. Insert the test card into Getein1100 and press "ENT" button after reaction time is elapsed. The result will be shown on the screen and printed automatically.

For Getein1600:

9. Each cartridge for Getein1600 contains a specific RFID card which can calibrate automatically.

10. Place samples in the designed area of the sample holder, insert the holder and select the right test item, Getein1600 will do the testing and print the result automatically.
- Notes:
1. It is required to perform "SD Card Calib" calibration when using a new batch of kits.

2. It is suggested to calibrate once for one batch of kits for Getein1100.

3. Make sure the test card and the sample insertion is correct and complete.
- TEST RESULTS
- Getein1100/Getein1600 can scan the test card automatically and display the result on the screen. For additional information, please refer to the user manual of Getein1100/Getein1600.
- EXPECTED VALUE
- The expected normal value for HCG was determined by testing samples from 315 healthy, non-pregnant individuals. The 97.5th percentile of the concentration for HCG is 5.1 mIU/mL. According to the literature, HCG results greater than or equal to 25 mIU/mL (IU/L) are considered positive. Representative HCG ranges during normal pregnancy are shown in the table below. Because other clinical reference citations may show different values, it is recommended that each laboratory establish its expected values for the population it serves.
- | Serum HCG Levels During Normal Pregnancy | |
|--|----------------|
| Gestational weeks | HCG (IU/L) |
| 0.2-1 week | 5-50 |
| 1-2 week | 50-500 |
| 2-3 week | 100-5,000 |
| 3-4 week | 500-10,000 |
| 4-5 week | 1,000-50,000 |
| 5-6 week | 10,000-100,000 |
| 6-8 week | 15,000-200,000 |
- PERFORMANCE CHARACTERISTICS
- Measuring Range 5~10000 mIU/ml
Lower Detection Limit ≤5 mIU/ml
Within-Run Precision ≤10%
Between-Run Precision ≤15%
Method Comparison:
The assay was compared with Roche Cobas E601 Immunology Analyzer and its matching HCG-β test kits with 200 serum samples (75 positive samples and 125 negative samples). The correlation coefficient (r) for HCG-β is 0.987.
- LIMITATIONS
1. As with all diagnostic tests, a definitive clinical diagnosis should not be made based on the result of a single test. The test results should be interpreted considering all other test results and clinical information such as clinical signs and symptoms.

2. Samples containing interferents may influence the results. The table below listed the maximum allowance of these potential interferents.
- | | | | |
|---------------------|------------|---------------------------|-----------|
| Interferent | Hemoglobin | Triglyceride | Bilirubin |
| Concentration (Max) | 5 g/L | 25 g/L | 0.1 g/L |
| Interferent | RF | Human anti-mouse antibody | Biotin |
| Concentration (Max) | 3000 IU/mL | 120 g/L | 80 ng/mL |
- REFERENCES
1. Tietz NW. Clinical Guide to Laboratory Tests, 3rd Ed. 1995. p. 134-136.

2. Hohnadel DC, Kaplan LA. Beta-hCG: Methods in clinical chemistry. Edited by Pesc, AJ and Kaplan LA. St. Louis, MO: The C.V. Mosby Company, 1987 .

3. Cole LA. New discoveries on the biology and detection of human chorionic gonadotropin. Reprod. Biol. Endocrinol. 7: . doi:10.1186/14777-7827-7-8.
4. Hoermann R, Spoeitl G, Moncayo R, et al. Evidence for the presence of human chorionic gonadotropin (hCG) and free beta-subunit of hCG in the human pituitary. J. Clin. Endocrinol. Metab. 71 (1):179-186.

5. EN ISO 18113-1:2009 In vitro diagnostic medical devices - Information supplied by the manufacturer (labelling) - Part 1: Terms, definitions and general requirements.

6. EN ISO 18113-2:2009 In vitro diagnostic medical devices - Information supplied by the manufacturer (labelling) - Part 2: In vitro diagnostic reagents for professional use (ISO 18113-2:2009).
- DESCRIPTION OF SYMBOLS USED
- The following graphical symbols used in or found on HCG-β Fast Test Kit (Immunofluorescence Assay) are the most common ones appearing on medical devices and their packaging. They are explained in more details in the European Standard EN 980:2008 and International Standard ISO 15223-1:2007.
- | Key to symbols used | | | |
|---------------------|------------------------------|--|---|
| | Manufacturer | | Expiration date |
| | Do not reuse | | Date of manufacture |
| | Consult instructions for use | | Batch code |
| | Temperature limitation | | In vitro diagnostic medical device |
| | Sufficient for CE mark | | Authorized representative in the European Community |
- Thank you for purchasing HCG-β Fast Test Kit (Immunofluorescence Assay). Please read this user manual carefully before operating to ensure proper use.
- Version: WIF-17-S-01
- Getein Biotech, Inc.

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HCG+ β Control

REF QC013

User Manual

PRODUCT NAME

HCG+ β Control

PRODUCT SPECIFICATION

Package: 3(Level)*2(Vial)*1(ml), 3(Level)*1(Vial)*1(ml)
HCG+ β Control - Level 1/2/3

INTENDED USE

This product is intended for *in vitro* diagnostic use in the quality control of HCG+ β on the Getein Platforms.

PRINCIPLE

The lyophilized HCG+ β control is prepared from dissolving stable and high quality recombinant HCG antigen into calf serum. With matching equipments and reagents, it can fulfill value transfer work. As different equipments and reagents have uncertainty to some extent, different control results may appear.

CONTENTS

The kit for FIA8000/FIA8600/Getein1100 contains:

1. HCG+ β Control - Level 1
HCG+ β Control - Level 2
HCG+ β Control - Level 3
2. User manual: 1 piece/box

3. Target value sheet: 1 piece/box

The kit for Getein1600 contains:

1. HCG+ β Control - Level 1
HCG+ β Control - Level 2
HCG+ β Control - Level 3
2. User manual: 1 piece/box
3. Quality control holder - Level 1
Quality control holder - Level 2
Quality control holder - Level 3

Note: Each quality control holder is labelled with barcode which contains target value and level of different items.

MATCHING EQUIPMENTS

FIA8000/8600 Quantitative Immunoassay Analyzer
Getein1100/1600 Immunofluorescence Quantitative Analyzer

STORAGE AND STABILITY

UNOPENED: The product is stable for 18 months at -20°C and for 90 days at 2 ~ 8°C to avoid light.

OPENED: The product is stable for 15 days at 2 ~ 8°C if kept capped in original container and free from contamination. Only the required amount of product should be removed. Any residual product should NOT BE RETURNED to the original vial after using. It is recommended to be dispensed into smaller vials after dilution and stable for 30 days at -20 ~ -70°C.

MATERIALS REQUIRED BUT NOT PROVIDED

1. 1 ml pipette
2. Distilled water
3. Getein test kit
4. Getein instrument

TEST PROCEDURE

1. The product should be brought to room temperature (15 ~ 30°C) prior to use.
2. Open the vial carefully in case of the loss of content.

3. Dissolve each control material with 1 ml distilled water.
4. Gently mix until all material has dissolved. Avoid violent shaking.
5. Keep it at room temperature for 5 ~ 10 minutes before use.
For FIA8000/FIA8600/Getein1100:

6. Treat the control in the same manner as patient specimen in the assay procedure. Follow the directions of test kit and the instrument application instruction.

For Getein1600:

7. Match each vial with corresponding quality control holder.
8. Insert quality control holder into sample holder.
9. Insert sample holder with a constant speed and barcode facing the scanner, refer to the User Manual of Getein1600 to start QC testing.

ASSIGNED VALUES

Refer to values listed on the target value sheet.

If the result is beyond the range, it indicates the existence of some unreliable factors in the testing system. Referring to the control graph helps judge the accuracy and stability of the testing system.

The expected range of the mean is provided to aid laboratory until it has established its own mean and SD for its methods.

PERFORMANCE CHARACTERISTICS

1. Homogeneity: $\leq 15\%$
2. Accuracy range: Refer to the target value sheet

LIMITATIONS

1. This product can only be used on the Getein Platforms.
2. Variation exists between different equipments developed by different methods even using the same control product.
3. This product is not intended to be used as standard material.

NOTES

1. For *in vitro* diagnostic use only.
2. Do not use the product beyond the expiration date.
3. Avoid multiple freeze-thaw cycles.

4. Do not use the product if it is contaminated with bacteria.
5. Proper handling and disposal methods should be followed in accordance with local regulations.

DESCRIPTION OF SYMBOLS USED

The following graphical symbols used in or found on HCG+ β control are the most common ones appearing on medical devices and their packaging. They are explained in more details in the European Standard EN 980:2008 and EN ISO15223-1:2016.

Key to symbols used			
	Manufacturer		Expiration date
	Catalogue number		Date of manufacture
	Consult instructions for use		Batch code
	Temperature limitation		<i>In vitro</i> diagnostic medical device
	Sufficient for		Biological risk
	CE mark		Authorized representative in the European Community

Thank you for purchasing HCG+ β Control.

Please read this user manual carefully before operating to ensure proper use.

Version: WZK13-S-04



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hs-CRP Fast Test Kit

(Immunofluorescence Assay)

Getein1100: Cat.# IF1003

Getein1600: Cat.# IF2003

User Manual

INTENDED USE

hs-CRP Fast Test Kit (Immunofluorescence Assay) is intended for *in vitro* quantitative determination of C-reactive protein (CRP) in serum, plasma whole blood, or fingertip blood. Measurement of CRP is useful for the detection and evaluation of infection, tissue injury and inflammatory disorders. Measurement of high sensitivity CRP (hs-CRP), when used in conjunction with traditional clinical laboratory evaluation of acute coronary syndromes (ACS), may be useful as an independent marker of prognosis for recurrent events in patients with stable coronary disease or ACS.

SUMMARY

C-reactive protein is an acute-phase reactant that precipitated with Pneumococcal C-polysaccharide, and is a non-specific immune response component. CRP has wide distribution in our body, and is an acute-phase protein produced in the liver in response to microbic infection or tissue injury, and the hs-CRP can be used to detect lower concentrations of CRP in serum or plasma. Studies revealed hs-CRP levels seem to be correlated with Atherosclerosis and Acute Myocardial Infarction. And the hs-CRP is an inflammation "marker" for ACS patient and is helpful for primary prevention and risk assessment of cardiovascular disease. Its combination with the ratio of total cholesterol to HDL-C is more accurate than other risk factor in predicting cardiovascular disease.

The American Heart Association and US Centers for Disease Control and Prevention have advocated hs-CRP as a predictor of cardiovascular disease (CVD) to define risk groups: less than 1.0 mg/L indicates low risk, 1.0 to 3.0 mg/L means moderate risk, and the amount above 3.0 mg/L (lower than 10 mg/L) strongly suggests a high risk of CVD. Moreover, higher CRP levels are found in late pregnant women, mild inflammation and viral infections (10~40 mg/L), active inflammation, bacterial infection (40~200 mg/L), severe bacterial infections and burns

(>200 mg/L).

PRINCIPLE

The test uses an anti-human hs-CRP monoclonal antibody conjugated with fluorescence latex and another anti-human hs-CRP monoclonal antibody coated on the test line. After the sample has been applied to the test strip, the fluorescence latex-labelled anti-human hs-CRP monoclonal antibody binds with the hs-CRP in sample and forms a marked antigen-antibody complex. This complex moves to the test card detection zone by capillary action. Then marked antigen-antibody complex is captured on the test line by the anti-human hs-CRP monoclonal antibody. The fluorescence intensity of the test line increases in proportion to the amount of hs-CRP in sample. Then insert test card into Getein1100 Immunofluorescence Quantitative Analyzer/Getein1600 Immunofluorescence Quantitative Analyzer (hereinafter referred to as Getein1100 and Getein1600), the concentration of hs-CRP in sample will be measured and displayed on the screen. The value will be stored in Getein1100/Getein1600 and available for downloading. The result can be easily transmitted to the laboratory or hospital information system.

CONTENTS

1. A kit for Getein1100 contains:

Getein hs-CRP test card in a sealed pouch with desiccant	25
Disposable pipet	25
Sample diluent	25
SD card	1
User manual	1

2. A kit for Getein1600 contains:

Sealed cartridge with 24/48 Getein hs-CRP test cards ..	2
User manual	1
<u>Package specifications:</u>	
2×24 tests/kit, 2×48 tests/kit	
<u>Materials required for Getein1600:</u>	
Sample diluent	1
Box with pipette tips	1
Mixing plate	1

3. Sample diluent composition:

Phosphate buffered saline, proteins, detergent, preservative, stabilizer.

4. A test card consists of:

A plastic shell and a reagent strip which is composed of a sample pad, nitrocellulose membrane (one end of the membrane is coated with a fluorescence latex-labelled anti-human hs-CRP monoclonal antibody, the test line is coated

with another anti-human hs-CRP monoclonal antibody and the control line is coated with rabbit anti-mouse IgG antibody), absorbent paper and liner.

Note: Do not mix or interchange different batches of kits.

APPLICABLE DEVICE

Getein1100 Immunofluorescence Quantitative Analyzer

Getein1600 Immunofluorescence Quantitative Analyzer

STORAGE AND STABILITY

Store the test card at 4~30°C with a valid period of 24 months. Use the test card for Getein1100 within 1 hour once the foil pouch is opened.

For test card of Getein1600: if the cartridge is opened, it could be stable within 24 hours once exposed to air. If the test cards can't be used up at a time, please put the cartridge back to the foil pouch and reseal along the entire edge of zip-seal. The remaining test cards should be used up within 7 days.

Store the sample diluent/whole blood buffer at 0~30°C with a valid period of 24 months.

Store the sample diluent/whole blood buffer at 2~8°C for better results.

PRECAUTIONS

1. For *in vitro* diagnostic use only.
2. For professional use only.
3. Do not use the kit beyond the expiration date.
4. Do not use the test card if the foil pouch or the cartridge is damaged.
5. Do not open pouches or the cartridge until ready to perform the test.
6. Do not reuse the test card.
7. Do not reuse the pipet.
8. Handle all specimens as potentially infectious. Proper handling and disposal methods should be followed in accordance with local regulations.
9. Carefully read and follow user manual to ensure proper test performance.

SPECIMEN COLLECTION AND PREPARATION

1. This test can be used for *serum, plasma, whole blood and fingertip blood samples*. *Heparin, sodium citrate and EDTA* can be used as the anticoagulant for plasma, whole blood and fingertip blood. Samples should be free of hemolysis.

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NT-proBNP

Fast Test Kit

(Immunofluorescence Assay)

User Manual

REF IF1002 for Getein1100
IF2002 for Getein1600

INTENDED USE

NT-proBNP Fast Test Kit (Immunofluorescence Assay) is intended for *in vitro* quantitative determination of N-terminal B-type natriuretic peptide precursor (NT-proBNP) in human serum, plasma or whole blood samples. This test is used as an aid in the clinical diagnosis, prognosis and evaluation of Heart Failure (HF).

SUMMARY

N-terminal B-type natriuretic peptide precursor (NT-proBNP) is secreted from the left cardiac ventricle in response to volume and pressure overload. It's an inactive N-terminal fragment that split from BNP prohormone. NT-proBNP can be used to evaluate heart contractile, diastolic dysfunction, and ventricular segmental wall motion coordination. Besides, it has high sensitivity and negative predictive value (>97%). As a gold standard recommended by the European Society of Cardiology, American Heart Association, and American College of Cardiology for the diagnosis and prognosis of heart failure, NT-proBNP is used to indicate heart failure patient at the early stage, determine HF risk levels, monitor medical efficiency of HF drug, evaluate prognosis of HF patient and to distinguish dyspnea that caused by HF from other diseases. Furthermore, NT-proBNP is a risk assessment indicator for Acute Coronary Syndrome.

PRINCIPLE

The test uses an anti-human NT-proBNP monoclonal antibody conjugated with fluorescence latex and an anti-human NT-proBNP polyclonal antibody coated on the test line. After the sample has been applied to the test strip, the fluorescence latex-labelled anti-human NT-proBNP monoclonal antibody binds with the NT-proBNP in sample and forms a marked antigen-antibody complex. This complex moves to the test card detection zone by capillary action. Then marked antigen-antibody complex is captured on the test line by the anti-human NT-proBNP polyclonal antibody. The fluorescence intensity of the test line increases in proportion to the amount of

NT-proBNP in sample.

Then insert test card into Getein1100 Immunofluorescence Quantitative Analyzer/Getein1600 Immunofluorescence Quantitative Analyzer (hereinafter referred to as Getein1100 and Getein1600), the concentration of NT-proBNP in sample will be measured and displayed on the screen. The value will be stored in Getein1100/Getein1600 and available for downloading. The result can be easily transmitted to the laboratory or hospital information system.

CONTENTS

1. A kit for Getein1100 contains:

Package specifications: 25 tests/box, 10 tests/box

- 1) NT-proBNP test card in a sealed pouch with desiccant
- 2) Disposable pipet
- 3) User manual: 1 piece/box
- 4) SD card: 1 piece/box
- 5) Whole blood buffer: 1 bottle/box

2. A kit for Getein1600 contains:

Package specifications: 2×24 tests/kit, 2×48 tests/kit

- 1) Sealed cartridge with 24/48 Getein NT-proBNP test cards
 - 2) User manual: 1 piece/box
- Materials required for Getein1600:

- 1) Sample diluent: 1 bottle/box
- 2) Box with pipette tips: 96 tips/box
- 3) Mixing plate: 1 piece/box

3. Sample diluent/Whole blood buffer composition:

Phosphate buffered saline, proteins, detergent, preservative, stabilizer.

4. A test card consists of:

A plastic shell and a reagent strip which is composed of a sample pad, nitrocellulose membrane (one end of the membrane is coated with a fluorescence latex-labelled anti-human NT-proBNP monoclonal antibody, the test line is coated with another anti-human NT-proBNP monoclonal antibody and the control line is coated with rabbit anti-mouse IgG antibody), absorbent paper and liner.

Note: Components from different batches must not be interchanged.

APPLICABLE DEVICE

Getein1100 Immunofluorescence Quantitative Analyzer
Getein1600 Immunofluorescence Quantitative Analyzer

STORAGE AND STABILITY

Store the test card at 4~30°C with a valid period of 24 months.

Use the test card for Getein1100 within 1 hour once the foil pouch is opened.

For test card of Getein1600: if the cartridge is opened, it could be stable within 24 hours once exposed to air. If the test cards can't be used up at a time, please put the cartridge back to the foil pouch and reseal along the entire edge of zip-seal. The remaining test cards should be used up within 7 days.

Store the sample diluent/whole blood buffer at 0~30°C with a valid period of 24 months.

Store the sample diluent/whole blood buffer at 2~8°C for better results.

PRECAUTIONS

1. For *in vitro* diagnostic use only.
2. Do not use the kit beyond the expiration date.
3. Do not use the test card if the foil pouch or the cartridge is damaged.
4. Do not open pouches or the cartridge until ready to perform the test.
5. Do not reuse the test card.
6. Do not reuse the pipet.
7. Handle all specimens as potentially infectious. Proper handling and disposal methods should be followed in accordance with local regulations.
8. Carefully read and follow the manual to ensure proper test performance.

SPECIMEN COLLECTION AND PREPARATION

1. This test can be used for **serum, plasma and whole blood samples**. **Heparin and sodium citrate** should be used as the anticoagulant for plasma and whole blood. Samples should be free of hemolysis.
2. Suggest using serum or plasma for better results.
3. Serum or plasma can be used directly. For whole blood sample, one drop of whole blood buffer must be added before testing.
4. If testing is delayed, serum and plasma samples may be stored up to 1 day at 2~8°C or stored at -20°C for 3 months before testing (whole blood sample may be stored up to 3 days at 2~8°C).
5. Refrigerated or frozen sample should reach room temperature and be homogeneous before testing. Avoid multiple freeze-thaw cycles.
6. Do not use heat-inactivated samples.
7. **SAMPLE VOLUME (for Getein1100): 100 µl.**

TEST PROCEDURE

1. Collect specimens according to user manual.
2. Test card, sample and reagent should be brought to room temperature before testing.

For Getein1100:

3. Confirm SD card lot No. in accordance with test kit lot No..
Perform "SD card" calibration when necessary.
4. Remove the test card from the sealed pouch immediately before use. Label the test card with patient or control identification.
5. Put the test card on a clean table, horizontally placed.
6. Using sample transfer pipette, deliver **100 µl** of sample into the sample port on the test card (for whole blood sample, one drop of whole blood buffer must be added after loading 100 µl sample on the test card).
7. **Reaction time: 10 minutes.** Insert the test card into Getein1100 and press "ENT" button or click on "Start" icon (for Android Getein 1100) after reaction time is elapsed. The result will be shown on the screen and printed automatically.

For Getein1600:

8. Each cartridge for Getein1600 contains a specific RFID card which can calibrate automatically.
9. Place the sample diluent at the correct position in Getein16-00.
10. Place samples in the designed area of the sample holder, insert the holder and select the right test item, Getein1600 will do the testing and print the result automatically.

Notes:

1. It is required to perform "SD card" calibration when using a new batch of kits for Getein1100.
2. It is suggested to calibrate once for one batch of kits for Getein1100.
3. Make sure the test card and the sample insertion is correct and complete.

TEST RESULTS

Getein1100/Getein1600 can scan the test card automatically and display the result on the screen. For additional information, please refer to the user manual of Getein1100/Getein1600.

EXPECTED VALUE

The expected normal value for NT-proBNP was determined by testing samples from 2,500 apparently healthy individuals. The 95th percentile of the concentration for NT-proBNP is 185 pg/ml and the 97.5th percentile of the concentration for NT-proBNP is 300 pg/ml. Because of the apparent difference of the concentration of NT-proBNP among different age groups, the reference values of the NT-proBNP are reported in groups. Details refer to Table 1. Clinical diagnosis value: refer to Roche criterion, details see Table 2.

Table 1 NT-proBNP reference value

Age Percentile	≤44	45-54	55-64	65-74	≥75	Statistic analysis
95	98.5	130	215	290	530	185
97.5	116	170	270	350	740	300

Table 2 Standard of excluding/diagnosing HF by NT-proBNP

Age	<50	50-75	≥75	Diagnosis of HF
NT-proBNP (pg/ml)	≥450	≥900	≥1800	High probability of HF
	300-450	300-900	300-1800	Low probability of HF, need to combine with other clinical evaluation
	<300	<300	<300	Exclude HF

It is recommended that each laboratory establish its own expected values for the population it serves.

PERFORMANCE CHARACTERISTICS

Measuring Range	100-35000 pg/ml
Lower Detection Limit	≤100 pg/ml
Within-Run Precision	≤10%
Between-Run Precision	≤15%

Method Comparison:

The assay was compared with ROCHE E170 and its matching NT-proBNP test kits with 232 serum samples. The correlation coefficient (r) for NT-proBNP is 0.988.

LIMITATIONS

1. As with all diagnostic tests, a definitive clinical diagnosis should not be made based on the result of a single test. The test results should be interpreted considering all other test results and clinical information such as clinical signs and symptoms.
2. Samples containing interferents may influence the results. The table below listed the maximum allowance of these potential interferents.

Interferent	Hemoglobin	Triglyceride	Bilirubin
Concentration (Max)	5 g/L	10 g/L	0.2 g/L

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3. EN ISO 18113-1:2011 In vitro diagnostic medical devices - Information supplied by the manufacturer (labelling) - Part 1: Terms, definitions and general requirements.
4. EN ISO 18113-2:2011 In vitro diagnostic medical devices - Information supplied by the manufacturer (labelling) - Part 2: In vitro diagnostic reagents for professional use.

DESCRIPTION OF SYMBOLS USED

The following graphical symbols used in or found on NT-proBNP Fast Test Kit (Immunofluorescence Assay) are the most common ones appearing on medical devices and their packaging. They are explained in more details in the European Standard EN ISO 15223 -1:2016/ISO 15223-1:2016.

Key to symbols used			
	Manufacturer		Use-by date
	Do not re-use		Date of manufacture
	Consult instructions for use		Batch code
	Temperature limit		In vitro diagnostic medical device
	Contains sufficient for <n> tests		Authorized representative in the European Community
	CE mark		Do not use if package is damaged
	Catalogue number		

Thank you for purchasing NT-proBNP Fast Test Kit (Immunofluorescence Assay). Please read this user manual carefully before operating to ensure proper use.

Version: WIF03-S-08

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PCT

Fast Test Kit

(Immunofluorescence Assay)

User Manual

REF IF1007 for Getein1100
IF2007 for Getein1600

INTENDED USE

PCT Fast Test Kit (Immunofluorescence Assay) is intended for *in vitro* quantitative determination of Procalcitonin (PCT) in human serum, plasma or whole blood samples. The test is used as an aid in the assessment and evaluation of patients suspected of bacterial infection, trauma or shock.

SUMMARY

PCT is a peptide precursor of the hormone calcitonin, the latter being involved with calcium homeostasis. It is composed of 116 amino acids and is produced by parafollicular cells (C cells) of the thyroid and by the neuroendocrine cells of the lung and the intestine.

Measurement of PCT can be used as a marker of severe sepsis and generally grades well with the degree of sepsis, although levels of PCT in the blood are very low. PCT has the greatest sensitivity and specificity for differentiating patients with systemic inflammatory response syndrome (SIRS) from those with sepsis.

PCT levels may be useful to distinguish bacterial infections from nonbacterial infections. It has shown that PCT may help guide therapy and reduce antibiotic use, which can help save on cost of antibiotic prescriptions and drug resistance.

PRINCIPLE

The test uses an anti-human PCT monoclonal antibody conjugated with fluorescence latex. For PCT product, test line 1 was coated with anti-human PCT polyclonal antibody and test line 2 was coated with another anti-human PCT monoclonal antibody. After the sample has been applied to the test strip, the fluorescence latex-labelled anti-human PCT monoclonal antibody binds with the PCT in sample and forms a marked antigen-antibody complex. This complex moves to the test card detection zone by capillary action. Then marked antigen antibody complex is captured on the test line by the other anti-

human PCT monoclonal antibody or the polyclonal antibody. The fluorescence intensity of the test line increases in proportion to the amount of PCT in sample. Then insert test card into Getein1100 Immunofluorescence Quantitative Analyzer/Getein1600 Immunofluorescence Quantitative Analyzer (hereinafter referred to as Getein1100 and Getein1600), the concentration of PCT in sample will be measured and displayed on the screen. The value will be stored in Getein1100/Getein1600 and available for downloading. The result can be easily transmitted to the laboratory or hospital information system.

CONTENTS

1. A kit for Getein1100 contains:

Package specifications: 25 tests/box, 10 tests/box

- 1) PCT test card in a sealed pouch with desiccant
- 2) Disposable pipet
- 3) User manual: 1 piece/box
- 4) SD card: 1 piece/box
- 5) Whole blood buffer: 1 bottle/box

2. A kit for Getein1600 contains:

Package specifications: 2×24 tests/kit, 2×48 tests/kit

- 1) Sealed cartridge with 24/48 Getein PCT test cards
 - 2) User manual: 1 piece/box
- Materials required for Getein1600:

- 1) Sample diluent: 1 bottle/box
- 2) Box with pipette tips: 1 piece/box
- 3) Mixing plate: 1 piece/box

3. Whole blood buffer/sample diluent composition:

Phosphate buffered saline, proteins, detergent, preservative, stabilizer.

4. A test card consists of:

A plastic shell and a reagent strip which is composed of a sample pad, fluorescence latex pad, nitrocellulose membrane (one end of the membrane is coated with a fluorescence latex-labelled anti-human PCT monoclonal antibody, the test line are coated with another anti-human PCT monoclonal antibody and polyclonal antibody, and the control line is coated with rabbit anti-mouse IgG antibody), absorbent paper and liner.

Note: Do not mix or interchange different batches of kits.

APPLICABLE DEVICE

Getein1100 Immunofluorescence Quantitative Analyzer
Getein1600 Immunofluorescence Quantitative Analyzer

STORAGE AND STABILITY

Store the test card at 4~30°C with a valid period of 24 months. Use the test card for Getein1100 within 1 hour once the foil pouch is opened.

For test card of Getein1600: if the cartridge is opened, it could be stable within 24 hours once exposed to air. If the test cards can't be used up at a time, please put the cartridge back to the foil pouch and reseal along the entire edge of zip-seal. The remaining test cards should be used up within 7 days.

Store the whole blood buffer/sample diluent at 0~30°C with a valid period of 24 months.

Store the whole blood buffer/sample diluent at 2~8°C for better results.

PRECAUTIONS

1. For *in vitro* diagnostic use only.
2. Do not use the kit beyond the expiration date.
3. Do not use the test card if the foil pouch or the cartridge is damaged.
4. Do not open pouches or the cartridge until ready to perform the test.
5. Do not reuse the test card.
6. Do not reuse the pipet.
7. Handle all specimens as potentially infectious. Proper handling and disposal methods should be followed in accordance with local regulations.
8. Carefully read and follow the manual to ensure proper test performance.

SPECIMEN COLLECTION AND PREPARATION

1. This test can be used for **serum, plasma and whole blood samples**. **Heparin and sodium citrate** should be used as the anticoagulant for plasma and whole blood. Samples should be free of hemolysis.
2. Suggest using serum or plasma for better results.
3. Serum or plasma can be used directly. For whole blood sample, one drop of whole blood buffer must be added before testing.
4. If testing is delayed, serum and plasma samples may be stored up to 7 days at 2~8°C or stored at -20°C for 6 months before testing (whole blood sample may be stored up to 3 days at 2~8°C).
5. Refrigerated or frozen sample should reach room temperature and be homogeneous before testing. Avoid multiple freeze-thaw cycles.
6. Do not use heat-inactivated samples.
7. **SAMPLE VOLUME (for Getein1100): 100 µl.**

TEST PROCEDURE

- 1. Collect specimens according to user manual.
- 2. Test card, sample and reagent should be brought to room temperature before testing.

For Getein1100:

- 3. Confirm SD card lot No. in accordance with test kit lot No.. Perform SD card calibration when necessary.
- 4. Remove the test card from the sealed pouch immediately before use. Label the test card with patient or control identification.
- 5. Put the test card on a clean table, horizontally placed.
- 6. Using sample transfer pipette, deliver **100 µl** of sample into the sample port on the test card (for whole blood sample, one drop of whole blood buffer must be added after loading 100 µl sample on the test card).
- 7. **Reaction time: 15 minutes.** Insert the test card into Getein1100 and press "ENT" button or click on "Start" icon (for Android Getein 1100) after reaction time is elapsed. The result will be shown on the screen and printed automatically.

For Getein1600:

- 8. Each cartridge for Getein1600 contains a specific RFID card which can calibrate automatically.
- 9. Place the sample diluent at the correct position in Getein16-00.
- 10. Place samples in the designed area of the sample holder, insert the holder and select the right test item, Getein1600 will do the testing and print the result automatically.

Notes:

- 1. It is required to perform SD card calibration when using a new batch of kits for Getein1100.
- 2. It is suggested to calibrate once for one batch of kits for Getein1100.
- 3. Make sure the test card and the sample insertion is correct and complete.

TEST RESULTS

Getein1100/Getein1600 can scan the test card automatically and display the result on the screen. For additional information, please refer to the user manual of Getein1100/Getein1600.

EXPECTED VALUE

The expected normal value for PCT was determined by testing samples from 500 apparently healthy individuals. The 99th percentile of the concentration for PCT is 0.10 ng/mL. (The probability that value of a normal person below 0.10 ng/ml is 99%.) The table below comes from the research of ACCP/SCCM (American College of Chest Physicians/Society of Critical Care Medicine), showing the PCT value and its clinical meaning ^[4]:

PCT concentration	Clinical significance
< 0.50 ng/ml	Local bacterial infection is possible, systemic infection (sepsis) is not likely.
≥ 0.50 and < 2.00 ng/ml	Systemic infection (sepsis) is possible, a moderate risk of severe sepsis and/or septic shock.
≥ 2.00 ng/ml	Systemic infection (sepsis) is likely, a high risk of severe sepsis and/or septic shock.

It is recommended that each laboratory establish its own expected values for the population it serves.

PERFORMANCE CHARACTERISTICS

Measuring Range	0.05~50.00 ng/ml
Lower Detection Limit	≤0.05 ng/ml
Within-Run Precision	≤10%
Between-Run Precision	≤15%

Method Comparison:

The assay was compared with Roche E170 automatic immunoassay system and its matching PCT test kits with 200 serum samples. The correlation coefficient (r) for PCT is 0.984.

LIMITATIONS

- 1. As with all diagnostic tests, a definitive clinical diagnosis should not be made based on the result of a single test. The test results should be interpreted considering all other test results and clinical information such as clinical signs and symptoms.
- 2. Samples containing interferent may influence the results. The table below listed the maximum allowance of these potential interferents.

Interferent	Hemoglobin	Triglyceride	Bilirubin
Concentration (Max)	5 g/L	10 g/L	0.2 g/L

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Version: WIF06-S-08

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