

STATEMENT

We, ACON Laboratories, Inc., having a registered office at *5850 Oberlin Drive #340, San Diego, CA 92121* authorize SRL Sanmedico having a registered office at *A. Corobceanu street 7A, apt. 9, Chisinău, MD-2012, Moldova*

to register, notify, renew or modify the registration of medical devices on the territory of the Republic of Moldova.

Date: March 18, 2024

Signature:



Qiyi Xie, Md, MPH
V.P. of Regulatory & Clinical Affairs
ACON Laboratories, Inc.



Certificate

No. Q5 104507 0001 Rev. 03

Holder of Certificate: **ACON Laboratories, Inc.**
5850 Oberlin Drive, #340
San Diego CA 92121
USA

Certification Mark:



Scope of Certificate: **Design and Development, Manufacture and distribution of In Vitro Diagnostic Test Kits and Reagents for the Determination of Infectious Diseases, Clinical Chemistry, Drugs of Abuse, Tumor/Cardiac Marker, Fertility/Pregnancy and Blood Glucose Monitoring System, Lancing Devices and Lancets**

The Certification Body of TÜV SÜD Product Service GmbH certifies that the company mentioned above has established and is maintaining a quality management system, which meets the requirements of the listed standard(s). All applicable requirements of the testing and certification regulation of TÜV SÜD Group have to be complied with. For details and certificate validity see: www.tuvsud.com/ps-cert?q=cert:Q5 104507 0001 Rev. 03

Report No.: SH22743A01

Valid from: 2022-09-15
Valid until: 2025-09-06

Date, 2022-09-15

Christoph Dicks
Head of Certification/Notified Body

Certificate

No. Q5 104507 0001 Rev. 03

Applied Standard(s):

EN ISO 13485:2016
Medical devices - Quality management systems -
Requirements for regulatory purposes
(ISO 13485:2016)
DIN EN ISO 13485:2016

Facility(ies):

ACON Laboratories, Inc.
5850 Oberlin Drive, #340, San Diego CA 92121, USA

Address holder for registration only

ACON Laboratories, Inc.
10125 Mesa Rim Road, San Diego CA 92121, USA

Manufacture and distribution of
In Vitro Diagnostic Test Kits and Reagents for the Determination of
Infectious Diseases, Clinical Chemistry, Drugs of Abuse,
Tumor/Cardiac Marker, Fertility/Pregnancy and Blood Glucose
Monitoring System, Lancing Devices and Lancets

ACON Laboratories, Inc.
6865 Flanders Dr., Suite B, San Diego CA 92121, USA

Storage of
In Vitro Diagnostic Test Kits and Reagents for the Determination of
Infectious Diseases, Clinical Chemistry, Drugs of Abuse,
Tumor/Cardiac Marker, Fertility/Pregnancy and Blood Glucose
Monitoring System, Lancing Devices and Lancets

AZURE Institute, Inc.
10125 Mesa Rim Road, San Diego CA 92121, USA

Design and Development of
In Vitro Diagnostic Test Kits and Reagents for the Determination of
Infectious Diseases, Clinical Chemistry, Drugs of Abuse,
Tumor/Cardiac Marker, Fertility/Pregnancy and Blood Glucose
Monitoring System, Lancing Devices and Lancets

Acon Laboratories Inc.
Guerrero Negro 9942 Parque Industrial Pacifico IV, 22644
Tijuana B.C. CP, MEXICO

Manufacture of
blood glucose test strips, antigen rapid test and IgG/IgM antibody
rapid test for infectious disease.



Benannt durch/Designated by
Zentralstelle der Länder
für Gesundheitsschutz
bei Arzneimitteln und
Medizinprodukten
www.zlg.de
ZLG-BS-245.10.07



Product Service

EC Certificate

Full Quality Assurance System

Directive 98/79/EC on In Vitro Diagnostic Medical Devices (IVDD), Annex IV excluding (4, 6)
(List A and B and devices for self-testing)

No. V1 104507 0003 Rev. 06

Manufacturer:

ACON Laboratories, Inc.

5850 Oberlin Drive, #340
San Diego CA 92121
USA

**Product Category(ies): Blood glucose measuring systems for self testing
and self-testing devices for clinical chemistry,
hematology and pregnancy and ovulation**

The Certification Body of TÜV SÜD Product Service GmbH declares that the aforementioned manufacturer has implemented a quality assurance system for design, manufacture and final inspection of the respective devices / device families in accordance with IVDD Annex IV. This quality assurance system conforms to the requirements of this Directive and is subject to periodical surveillance. For marketing of List A devices an additional Annex IV (4) certificate is mandatory. All applicable requirements of the testing and certification regulation of TÜV SÜD Group have to be complied with. For details and certificate validity see: [www.tuvsud.com/ps-cert?q=cert:V1 104507 0003 Rev. 06](http://www.tuvsud.com/ps-cert?q=cert:V1_104507_0003_Rev.06)

Report no.:

SH22743EXT01

Valid from:

2022-05-04

Valid until:

2025-05-26

Date,

2022-05-04

Christoph Dicks
Head of Certification/Notified Body



EC Certificate

Full Quality Assurance System

Directive 98/79/EC on In Vitro Diagnostic Medical Devices (IVDD), Annex IV excluding (4, 6)
(List A and B and devices for self-testing)

No. V1 104507 0003 Rev. 06

Model(s):

On Call Plus Blood Glucose Monitoring System,
On Call Plus Blood Glucose Test Strips,
On Call EZ II Blood Glucose Monitoring System,
On Call Advanced Blood Glucose Monitoring System,
On Call Advanced Blood Glucose Test Strips,
On Call Chosen Blood Glucose Test Strips,
On Call Vivid Blood Glucose Monitoring System (OGM-101),
On Call Vivid Blood Glucose Test Strips (OGS-101),
On Call Sharp Blood Glucose Monitoring System (OGM-121),
On Call Sharp Blood Glucose Test Strips (OGS-121)
On Call Plus II Blood Glucose Monitoring System (OGM-171),
On Call Plus II Blood Glucose Test Strips (OGS-171),
On Call Extra Blood Glucose Monitoring System (OGM-191),
On Call Extra Blood Glucose Test Strips (OGS-191),
On Call GK Dual Blood Glucose & Ketone Monitoring System (OGM-161),
On Call Blood Ketone Test Strips (OGS-161),
Urinalysis Reagent Strips (Urine),
UTI Urinary Tract Infection Test Strips,
Cholesterol Monitoring System (CCM-111),
CHOL Total Cholesterol Test Devices (CCS-111),
TRIG Triglycerides Test Devices (CCS-112),
HDL High Density Lipoprotein Test Devices (CCS-113),
3-1 Lipid Panel Test Devices (CCS-114),
Cholesterol CTRL Control Devices,
Cholesterol Monitoring System (CCM-101),
CHOL Total Cholesterol Test Strips (CCS-101),
PT/INR Monitoring System (CCM-151),
PT/INR Test Strips (CCS-151),
Hemoglobin Testing System (CCM-141),
Hemoglobin Test Strips (CCS-141),
hCG Pregnancy Rapid Test Cassette (Urine),
Pregnancy Rapid Test Midstream,
On Call Extra Mobile Blood Glucose Monitoring System (OGM-281),
On Call Sure Blood Glucose Monitoring System (OGM-211),
On Call Sure Sync Blood Glucose Monitoring System (OGM-212),
On Call Sure Blood Glucose Test Strips (OGS-211),
GIMA Blood Glucose Monitoring System,
GIMA Bluetooth Blood Glucose Monitoring System,
GIMA Blood Glucose Test Strips,
On Call GU Dual Blood Glucose & Uric Acid Monitoring



EC Certificate

Full Quality Assurance System

Directive 98/79/EC on In Vitro Diagnostic Medical Devices (IVDD), Annex IV excluding (4, 6)
(List A and B and devices for self-testing)

No. V1 104507 0003 Rev. 06

System (OGM-201),
On Call Blood Uric Acid Test Strips (OGS-201),
LH Ovulation Rapid Test Cassette (Urine),
Ovulation Rapid Test Midstream,
Ovulation & Pregnancy Test Combo Pack,
On Call Extra Voice Blood Glucose Monitoring System
(OGM-291),
Early Detection Pregnancy Test,
Digital Pregnancy Test,
Go-Keto Blood Glucose & Ketone Monitoring System (OGM-
161),
Go-Keto Blood Ketone Test Strips (OGS-161),
Go-Keto Blood Glucose Test Strips,
On Call Extra GM Blood Glucose Monitoring System(OGM-
191),
On Call Extra GM Blood Glucose Test Strips (OGS-191),
On Call Plus GM Blood Glucose Monitoring System,
On Call Plus GM Blood Glucose Test Strips,
Go-Keto Urinalysis Reagent Strips

Facility(ies):

ACON Laboratories, Inc.
5850 Oberlin Drive, #340, San Diego CA 92121, USA

ACON Laboratories, Inc.
10125 Mesa Rim Road, San Diego CA 92121, USA

AZURE Institute, Inc.
10125 Mesa Rim Road, San Diego CA 92121, USA

Acon Laboratories Inc.
Guerrero Negro 9942 Parque Industrial Pacifico IV, 22644 Tijuana
B.C. CP, MEXICO

Declaration of Conformity

ACON Laboratories, Incorporated
5850 Oberlin Drive #340
San Diego, CA 92121, USA

**We, the manufacturer, declare under our sole responsibility that the
in vitro diagnostic device:**

Mission[®] Urinalysis Reagent Strips (U031-XX1)

classified as Others in the directive 98/79/EC,

**meets all the provisions of the directive 98/79/EC on *in vitro* diagnostic
medical devices which apply to it**

**The self-declaration is according to Annex III
(excluding Section 6) of the Directive.**

Authorized Representative:
Medical Device Safety Service GmbH
Schiffgraben 41
30175 Hannover, Germany

Signed this 11 day of February, 2020
in San Diego, CA USA



Qiyi Xie, MD, MPH
Senior Staff, Regulatory Affairs & Clinical Affairs
Acon Laboratories, Inc.





ACON Laboratories, Inc.

10125 Mesa Rim Road. • San Diego, CA 92121 • USA
Tel: (858) 875-8000 • Fax: (858) 875-8099 • E-mail: info@aconlabs.com

November 11th 2016

CERTIFICATION LETTER

This letter is to certify that, Vitalie Goreacii, employed by Sanmedico SRL located at: Republic of Moldova, city Chisinau, str. Petricani 88/1 of. 10, MD-2059, have received all required training and is enabled and authorized to provide services with installation, commissioning, and maintenance to the products listed below:

Mission® U120 Urine Analyzer
Mission® U120 Ultra Urine Analyzer
Mission® U500 Urine Analyzer
Mission® PT/INR Coagulation Monitoring System
Mission® Cholesterol Monitoring System
Mission® Ultra Cholesterol Monitoring System
Mission® HB Hemoglobin Testing System
Mission® Plus HB Hemoglobin Testing System
OnCall® Glucose Meter

For further questions or inquiries regarding this matter, please refer to the contact information below.

Sincerely

A handwritten signature in black ink, appearing to read "Jassy Alvarenga", is written over a red circular stamp.



Jassy Alvarenga
International Account Manager
ACON Laboratories, Inc. S.A.

jalvarenga@aconlabs.com

+1 858 875 8085

Mission® Urinalysis Reagent Strips and Urine Analyzers

Obtain reliable and cost-effective results with *Mission®* Urinalysis Reagent Strips and Urine Analyzers!

- *Accurate*
- *Reliable*
- *Convenient*



Global Diagnostics for Local Markets™

Urinalysis Reagent Strips

Simple and Accurate

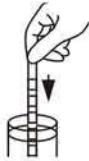
- Analytical sensitivity better than or comparable to market leaders
- High quality color chart ensures accurate visual reading

Flexible

- Compatible for visual and analyzer reading
- More than 30 different combinations available

Multiple Packaging Options and Long Shelf Life

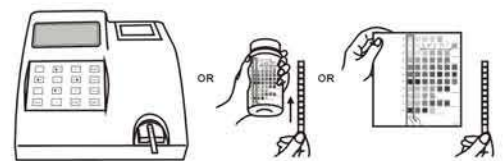
- Canister Packaging
 - Available in 25, 50, 100 and 150 strips per kit
 - 2 year shelf life for unopened canisters which offers cost savings and convenience for high volume testing
 - 3 month shelf life for strips in opened canisters
- Pouch Packaging *New!*
 - Single-strip Pouch
 - Individually packaged strips with 1, 3, 6 and 20 strips and 1 color chart per kit for OTC or low volume testing
 - Unique packaging maintains 2 year shelf life for all strips in the kit compared to 3 months for remaining strips in an opened canister
 - Multi-strip Pouch
 - Canister Refill Kits with 25 strips/pouch uniquely packaged to save cost for low volume testing and extended shelf life by using the canister for refills



Step 1: Immerse strip into urine



Step 2: Remove excess urine



Step 3: Obtain results by analyzer or visual reading

Catalog No.	No. of Parameters	Type of Strip [♦]		Strips per Canister [◇]	Pouch Packaging [▲]	Reading Method			Analyzer-Read Strips: Standard (S) or Additional (A)	Parameters													
		For Visual Reading	For Analyzer Reading (U120/U500)			Visual	U120	U500		ASC	GLU	BIL	KET	SG	BLO	pH	PRO	URO	NIT	LEU	ALB	CRE	
U031-131	13	13C	NA	100 [■]	✓	✓	NA	NA	A	*	*	*	*	*	*	*	*	*	*	*	*	*	*
U031-111	11	11A		100	✓	✓	✓	✓	S	*	*	*	*	*	*	*	*	*	*	*	*		
U031-101	10	10U		100	✓	✓	✓	✓	S		*	*	*	*	*	*	*	*	*	*	*		
		10A				✓	✓	✓	A	*	*	*	*	*	*	*	*	*	*	*			
		10C				✓	✓	✓	S		*	*	*	*	*	*	*	*	*	*	*	*	
U031-091	9	9U		100	✓	✓	✓	✓	S		*	*	*	*	*	*	*	*	*	*			
U031-081	8	8U		100	✓	✓	✓	✓	A		*	*	*	*	*	*	*	*	*	*	*		
		8N				✓	✓	✓	S		*	*	*	*	*	*	*	*	*	*	*		
		8S				✓	✓	✓	A		*	*	*	*	*	*	*	*	*	*	*	*	
U031-071	7	7N		100	✓	✓	✓	✓	A		*		*		*	*	*		*	*			
U031-061	6	6N	6NE	100	✓	✓	✓	✓	A		*				*	*	*		*	*			
		6U	6UE			✓	✓	✓				*		*	*		*	*	*				
U031-051	5	5B	5BE	100	✓	✓	✓		A		*		*		*	*	*						
		5N	5NE			✓	✓	✓			*	*		*	*	*		*	*				
		5S	5SE			✓	✓	✓			*	*		*	*	*		*	*				
		5U	5UE			✓	✓				*	*		*	*	*		*	*	*			
U031-041	4	4S	4SE	100	✓	✓	✓	✓	A		*			*		*	*						
		4B	4BE			✓	✓				*			*	*	*							
		4K	4KE			✓	✓	✓			*		*		*	*							
		4G	4GE			✓	✓				*			*	*				*				
		4N	4NE			✓	✓	✓			*			*	*			*	*				
		4P	4PE			✓	✓	✓			*			*	*			*	*				
U031-031	3	3P	3PE	100	✓	✓	✓	✓	A		*				*	*							
		3K	3KE			✓	✓	✓			*		*		*								
		3G	3GE			✓	✓	✓			*		*		*								
		3N	3NE			✓	✓	✓			*		*		*			*	*				
U031-021	2	2G	2GE	100	✓	✓	✓	✓	A		*				*		*						
		2K	2KE			✓	✓	✓			*		*										
		2N	2NE			✓	✓	✓			*		*					*					
		2B	2BE			✓	✓	✓			*		*										
		2U	2UE			✓	✓	✓			*		*					*	*				
		2S	2SE			✓	✓	✓			*		*					*	*				
		2C	2CE	100 [■]	✓	✓	✓		*		*							*	*				
U031-011	1	1B	1BE	100	✓	✓	✓		A					*									
		1P	1PE			✓	✓	✓					*										
		1G	1GE			✓	✓	✓			*												
		1K	1KE			✓	✓	✓			*		*										
		1R	1RE			✓	✓	✓			*				*								

♦ Type of Strip:
Visual Strip Size
1-6 Parameters: 5 mm x 80 mm; 7-11 Parameters: 5 mm x 108 mm;
12-13 Parameters: 5 mm x 121 mm
U120/U500 Strip Size
1-11 Parameters: 5 mm x 108 mm;
"E" means extended strip length for 1-6 Parameters

♦ Also available in canisters of 25, 50 and 150 strips.
■ Not available in canisters of 150 strips
▲ Single-strip Pouch available in 1, 3, 6 and 20 strip kit
Canister Refill Kit, with 25 strips per pouch or canister, available in 3-pouch and 1- canister kit, or 4-pouch kit

CE Marked for sale in the European Community
Cleared for US 510(k)



U120 Urine Analyzer



Accurate

- Up to 120 tests/hour in Continuous Test Option
- Capable of reading 1 strip at a time in Single Test Option
- Test modes include Routine, STAT and QC
- Automatic calibration for accurate results and easy operation

Reliable

- Can read up to 4 Strip combinations with 8, 9, 10, 11 parameters, additional strips with 1-11 parameters available upon request
- Minimal training required

Convenient Operation

- Saves and recalls the last 2,000 results automatically
- Audible beep signals operator to dip strips in urine
- Can print up to 3 copies per test for convenient reviewing and easy record keeping
- Option to print results on sticker paper for quick and simple record management

Easy Data Management

- Includes RS232C port for easy data transfer to an external computer or LIS
- Optional Barcode Reader to record patient ID

Unique Lockout Functions *new!*

- Strip Lockout
 - Prevents using strips of another brand on the U120 Urine Analyzer
 - Requires barcode reader scan or manual entry of the canister code
- User Lockout
 - Eliminates unapproved users from testing
 - Up to 10 lab operators can perform testing, but only the lab administrator can change analyzer settings
- QC Lockout
 - Prevents testing without passing QC
 - QC tests can be performed once every 8 hours, day, week or month
 - Analyzer will alert when to run QC test
 - If QC tests fail, analyzer will switch to STAT mode and list "E" at the end of each test number

Specifications

Feature	Specifications
Analyzer Type	Manual
Methodology	Reflectance Photometry
Detection	Photosensitive Diode
Throughput	Single Test Option: 60 tests/hour Continuous Test Option: 120 tests/hour
Test Modes	Routine, STAT and QC
Lockout Functions	Strip Lockout: Available Upon Request; User/QC Lockout: Included with option to turn ON/OFF
Memory	Last 2,000 results
Strip Incubation Time	1 Minute
Wavelength of Monochromatic LED	525 nm and 635 nm
Standard Strips	8, 9, 10, 11 Parameters (5 mm x 108 mm)
Additional Strips Available	1-11 Parameters (5 mm x 108 mm); see URS Parameters
Total Combinations Per Analyzer	4 Combinations
Analyzer Ports	Standard RS232C Port for Barcode Reader or Data Transfer USB Port for Data Transfer 25 Pin Parallel Port for External Printer
Capabilities	Internal Thermal Printer (included) RS232C Barcode Reader (optional) Optional External Printer (not included) USB or RS232C Data Transfer Cable (optional)
Major Readable Barcodes	Code 128, Code 39, Codabar (NW-7), Interleaved 25, UPC-A, UPC-E, EAN 8, EAN 13
Calibration	Automatic
Available Languages on the Screen	English and additional language(s)
Operating Conditions	0-40°C (32-104°F); ≤ 85% RH
Storage Conditions	-5-50°C (23-122°F); ≤ 90% RH
Power Source	100-240 VAC, 50-60 Hz
Dimensions (L x W x H)	27.2 cm x 26.9 cm x 14.6 cm (10.7" x 10.6" x 5.7")
Display Dimensions (L x W)	10.8 cm x 5.7 cm (4.2" x 2.2")
Weight	2.6 kg (5.7 lbs)

Ordering Information

Product Name	Catalog No.	Components		Kit Box Dimensions (L x W x H) & Weight	Carton Dimensions (L x W x H) & Weight	Number of Kits/Carton
U120 Urine Analyzer	U111-101 [†]	1 Urine Analyzer 1 Strip holder 2 Printer Paper Rolls	2 Fuses (2.0A) 1 Power Cord 1 Quick Start Guide 1 Instruction Manual	42.0 cm x 41.5 cm x 31 cm; 5.0 kg		1
U120 Urine Analyzer with Barcode Reader	U111-111 [†]	1 Urine Analyzer 1 Strip holder 2 Printer Paper Rolls 1 Barcode Reader (RS232C)	2 Fuses (2.0A) 1 Power Cord 1 Serial Splitter Cable (RS232C) 1 Quick Start Guide 1 Instruction Manual	44.5 cm x 44.5 cm x 40.0 cm; 5.5 kg		1
Barcode Reader	U221-111 [†]	1 Barcode Reader (RS232C)	1 Serial Splitter Cable (RS232C)	23.6 cm x 10.8 cm x 7.8 cm; 0.482 kg 9.3" x 4.3" x 3.1"; 17.0 oz	63.0 cm x 37.0 cm x 30.0 cm; 12.0 kg 24.8" x 14.6" x 11.8"; 423.3 oz	22
Printer Paper Rolls	U121-101	4 Printer Paper Rolls	Thermal Paper (0.06 m x 20 m): 200 results/roll Sticker Paper (0.06 m x 9 m): 100 results/roll	12.0 cm x 12.0 cm x 6.5 cm; 0.36 kg 4.7" x 4.7" x 2.6"; 12.7 oz	63.0 cm x 37.0 cm x 30.0 cm; 19.4 kg 24.8" x 14.6" x 11.8"; 684.3 oz	50
U120 Data Transfer Kit	U221-131 [†]	1 Data Transfer Cable (RS232C)	1 Package Insert	12.0 cm x 12.0 cm x 6.5 cm; 0.4 kg 4.7" x 4.7" x 2.6"; 14.1 oz	63.0 cm x 37.0 cm x 30.0 cm; 21.4 kg 24.8" x 14.6" x 11.8"; 684.3 oz; 754.9 oz	8

U500 Urine Analyzer



Accurate and Efficient

- Up to 500 tests/hour for medium/large volume sample testing
- Professional accuracy equivalent to market leader
- Automatic strip detection and alignment for better efficiency
- Test modes include Routine, STAT and QC

Easy to Operate

- Large touch screen LCD offers simple menu navigation
- Uniquely designed strip platform/waste tray unit for easy one-step cleaning

Convenient

- Automatic calibration and waste disposal reduce hands-on time
- Can read strips with 8, 9, 10, 11 parameters, additional strips with 1-11 parameters available upon request
- Strip selection of up to 4 combinations for analyzer reading
- Stores up to 2,000 records and automatically flags abnormal results
- Capable of printing results on sticker paper for quick and easy record management

Data Management Capability

- Includes RS232C port for easy data transfer to an external computer or LIS
- Optional Barcode Reader to record patient ID

Unique Lockout Functions Coming Soon!

- Strip Lockout
 - Prevents using strips of another brand on the U500 Urine Analyzer
 - Requires barcode reader scan or manual entry of the canister code
- User Lockout
 - Eliminates unapproved users from testing
 - Up to 10 lab operators can perform testing, but only the lab administrator can change analyzer settings
- QC Lockout
 - Prevents testing without passing QC
 - QC tests can be performed once every 8 hours, day, week or month
 - Analyzer will alert when to run QC test
 - If QC tests fail, analyzer will switch to STAT mode and list "E" at the end of each test number

Specifications

Feature	Specifications
Analyzer Type	Semi-Automatic
Methodology	Reflectance Photometry
Detection	Photosensitive Diode
Throughput	500 tests/hour (Measuring cycle: 7 seconds/test)
Test Modes	Routine, STAT and QC
Lockout Functions	Strip Lockout: Available Upon Request; User/QC Lockout: Included with option to turn ON/OFF
Memory	Last 2,000 Records
Strip Incubation Time	1 Minute
Wavelength	525 and 635 nm
Standard Strips	8, 9, 10, 11 Parameters (5 mm x 108 mm)
Additional Strips Available	1-11 Parameters (5 mm x 108 mm); see URS Parameters
Total Combinations Per Analyzer	4 Combinations
Waste Disposal Capacity	Up to 150 Strips
Analyzer Ports	Standard RS232C Port for Barcode Reader or Data Transfer 25 Pin Parallel Port for External Printer
Capabilities	Internal Thermal Printer (included) RS232C Barcode Reader (optional) Optional External Printer (not included) RS232C Data Transfer Cable (optional)
Major Readable Barcodes	Code 128, Code 39, Codabar (NW-7), Interleaved 25, UPC-A, UPC-E, EAN 8, EAN 13
Calibration	Automatic
Available Languages on the Screen	English and additional language(s)
Operating Conditions	0-40°C (32-104°F); ≤85% RH
Storage Conditions	-5-50°C (23-122°F); ≤90% RH
Power Source	100-240 VAC, 50-60 Hz
Dimensions (L x W x H)	36.6 cm x 28.3 cm x 19.5 cm (14.4" x 11.1" x 7.7")
Display Dimensions (L x W)	11.5 cm x 9.0 cm (4.5" x 3.5")
Weight	4.0 kg (8.8 lbs)

Ordering Information

Product Name	Catalog No.	Components	Kit Box Dimensions (L x W x H) & Weight	Carton Dimensions (L x W x H) & Weight	Number of Kits/Carton
U500 Urine Analyzer	U211-101✓	1 Urine Analyzer 1 Strip Platform/Waste Tray 2 Printer Paper Rolls	2 Fuses (2.0A) 1 Power Cord 1 Instruction Manual	51.0 cm x 42.0 cm x 38.5 cm; 7 kg 20.1" x 16.5" x 15.2"; 246.9 oz	1
U500 Urine Analyzer with Barcode Reader	U211-111✓	1 Urine Analyzer 1 Strip Platform/Waste Tray 2 Printer Paper Rolls 1 Barcode Reader (RS232C)	2 Fuses (2.0A) 1 Power Cord 1 Serial Splitter Cable (RS232C) 1 Instruction Manual	55.0 cm x 55.0 cm x 55.0 cm; 9.2 kg 21.7" x 21.7" x 21.7"; 324.5 oz	1
Barcode Reader	U221-111✓†	1 Barcode Reader (RS232C)	1 Serial Splitter Cable (RS232C)	23.6 cm x 10.8 cm x 7.8 cm; 0.482 kg 9.3" x 4.3" x 3.1"; 17.0 oz	22
Printer Paper Rolls	U121-101	4 Printer Paper Rolls	Thermal Paper (0.06 m x 20 m): 200 results/roll Sticker Paper (0.06 m x 9 m): 100 results/roll	12.0 cm x 12.0 cm x 6.5 cm; 0.360 kg 4.7" x 4.7" x 2.6"; 12.7 oz	50
U500 Data Transfer Kit	U221-131✓	1 Data Transfer Cable (RS232C)	1 Package Insert	12.0 cm x 12.0 cm x 6.5 cm; 0.40 kg 4.7" x 4.7" x 2.6"; 14.1 oz	8

We also offer other rapid diagnostic and medical products:

Blood Glucose Monitoring Systems, Immunoassay EIA/ELISA and more.

✓ CE Marked for sale in the European Community **CE**
† Cleared for US 510(k)



ACON Laboratories, Inc., 10125 Mesa Rim Road, San Diego, CA 92121, U.S.A. • Tel: 1-858-875-8000 • Fax: 1-858-200-0729 • E-mail: info@aconlabs.com
Please visit our website for details: www.aconlabs.com

Mission® Urinalysis Reagent Strips (Urine)

Package Insert

REF U031-011	REF U031-051	REF U031-091	English
REF U031-021	REF U031-061	REF U031-101	
REF U031-031	REF U031-071	REF U031-111	
REF U031-041	REF U031-081		

For rapid detection of multiple analytes in human urine.

For *in vitro* diagnostic use only.

INTENDED USE

The Urinalysis Reagent Strips (Urine) are firm plastic strips onto which several separate reagent areas are affixed. The test is for the qualitative and semi-quantitative detection of one or more of the following analytes in urine: Ascorbic acid, Glucose, Bilirubin, Ketone (Acetoacetic acid), Specific Gravity, Blood, pH, Protein, Urobilinogen, Nitrite and Leukocytes.

SUMMARY

Urine undergoes many changes during states of disease or body dysfunction before blood composition is altered to a significant extent. Urinalysis is a useful procedure as an indicator of health or disease, and as such, is a part of routine health screening. The Urinalysis Reagent Strips (Urine) can be used in general evaluation of health, and aids in the diagnosis and monitoring of metabolic or systemic diseases that affect kidney function, endocrine disorders and diseases or disorders of the urinary tract.^{1,2}

PRINCIPLE AND EXPECTED VALUES

Ascorbic acid: This test involves decolorization of Tillmann's reagent. The presence of ascorbic acid causes the color of the test field to change from blue-green to orange. Patients with adequate diet may excrete 2-10 mg/dL daily. After ingesting large amounts of ascorbic acid, levels can be around 200 mg/dL.

Glucose: This test is based on the enzymatic reaction that occurs between glucose oxidase, peroxidase and chromogen. Glucose is first oxidized to produce gluconic acid and hydrogen peroxide in the presence of glucose oxidase. The hydrogen peroxide reacts with potassium iodide chromogen in the presence of peroxidase. The extent to which the chromogen is oxidized determines the color which is produced, ranging from green to brown. Glucose should not be detected in normal urine. Small amounts of glucose may be excreted by the kidney.³ Glucose concentrations as low as 100 mg/dL may be considered abnormal if results are consistent.

Bilirubin: This test is based on azo-coupling reaction of bilirubin with diazotized dichloroaniline in a strongly acidic medium. Varying bilirubin levels will produce a pinkish-tan color proportional to its concentration in urine. In normal urine, no bilirubin is detectable by even the most sensitive methods. Even trace amounts of bilirubin require further investigation. Atypical results (colors different from the negative or positive color blocks shown on the color chart) may indicate that bilirubin-derived bile pigments are present in the urine specimen, and are possibly masking the bilirubin reaction.

Ketone: This test is based on ketones reacting with nitroprusside and acetoacetic acid to produce a color change ranging from light pink for negative results to a darker pink or purple color for positive results. Ketones are normally not present in urine. Detectable ketone levels may occur in urine during physiological stress conditions such as fasting, pregnancy and frequent strenuous exercise.⁴⁻⁶ In starvation diets, or in other abnormal carbohydrate metabolism situations, ketones appear in the urine in excessively high concentration before serum ketones are elevated.⁷

Specific Gravity: This test is based on the apparent pKa change of certain pretreated polyelectrolytes in relation to ionic concentration. In the presence of an indicator, colors range from deep blue-green in urine of low ionic concentration to green and yellow-green in urine of increasing ionic concentration. Randomly collected urine may vary in specific gravity from 1.003-1.035.⁸ Twenty-four hour urine from healthy adults with normal diets and fluid intake will have a specific gravity of 1.016-1.022.⁹ In cases of severe renal damage, the specific gravity is fixed at 1.010, the value of the glomerular filtrate.

Blood: This test is based on the peroxidase-like activity of hemoglobin which catalyzes the reaction of diisopropylbenzene dihydroperoxide and 3,3',5,5'-tetramethylbenzidine. The resulting color ranges from orange to dark blue. Any green spots or green color development on the reagent area within 60 seconds is significant and the urine specimen should be examined further. Blood is often, but not invariably, found in the urine of menstruating females. The significance of a trace reading varies among patients and clinical judgment is required in these specimens.

pH: This test is based on a double indicator system which gives a broad range of colors covering the entire urinary pH range. Colors range from orange to yellow and green to blue. The expected range for normal urine specimens from newborns is pH 5-7.⁹ The expected range for other normal urine specimens is pH 4.5-8, with an average result of pH 6.⁹

Protein: This reaction is based on the phenomenon known as the "protein error" of pH indicators where an indicator that is highly buffered will change color in the presence of proteins (anions) as the indicator releases hydrogen ions to the protein. At a constant pH, the development of any green color is due to the presence of protein. Colors range from yellow to yellow-green for negative results and green to green-blue for positive results. 1-14 mg/dL of protein may be excreted by a normal kidney.¹⁰ A color matching any block greater than trace indicates significant proteinuria. Clinical judgment is required to evaluate the significance of trace results.

Urobilinogen: This test is based on a modified Ehrlich reaction between p-diethylaminobenzaldehyde and urobilinogen in strongly acidic medium to produce a pink color. Urobilinogen is one of the major compounds produced in heme synthesis and is a normal substance in urine. The expected range for normal urine with this test is 0.2-1.0 mg/dL (3.5-17 µmol/L).⁸ A result of 2.0 mg/dL (35 µmol/L) may be of clinical significance, and the patient specimen should be further evaluated.

Nitrite: This test depends upon the conversion of nitrate to nitrite by the action of Gram negative bacteria in the urine. In an acidic medium, nitrite in the urine reacts with p-arsanilic acid to form a diazonium compound. The diazonium compound in turn couples with 1 N-(1-naphthyl) ethylenediamine to produce a pink color. Nitrite is not detectable in normal urine.⁹ The nitrite area will be positive in some cases of infection, depending on how long the urine specimens were retained in the bladder prior to collection. Retrieval of positive cases with the nitrite test ranges from as low as 40% in cases where little bladder incubation occurred, to as high as approximately 80% in cases where bladder incubation took place for at least 4 hours.

Leukocytes: This test reveals the presence of granulocyte esterases. The esterases cleave a derivatized pyrazole amino acid ester to liberate derivatized hydroxy pyrazole. This pyrazole then reacts with a diazonium salt to produce a beige-pink to purple color. Normal urine specimens generally yield negative results. Trace results may be of questionable clinical significance. When trace results occur, it is recommended to retest using a fresh specimen from the same patient. Repeated trace and positive results are of clinical significance.

REAGENTS AND PERFORMANCE CHARACTERISTICS

Based on the dry weight at the time of impregnation, the concentrations given may vary within manufacturing tolerances. The following table below indicates read times and performance characteristics for each parameter.

Reagent	Read Time	Composition	Description
Ascorbic Acid (ASC)	30 seconds	2,6-dichlorophenolindophenol; buffer and non-reactive ingredients	Detects ascorbic acid as low as 5-10 mg/dL (0.28-0.56 mmol/L).
Glucose (GLU)	30 seconds	glucose oxidase; peroxidase; potassium iodide; buffer; non-reactive ingredients	Detects glucose as low as 50-100 mg/dL (2.5-5 mmol/L).
Bilirubin (BIL)	30 seconds	2, 4-dichloroaniline diazonium salt; buffer and non-reactive ingredients	Detects bilirubin as low as 0.4-1.0 mg/dL (6.8-17 µmol/L).
Ketone (KET)	40 seconds	sodium nitroprusside; buffer	Detects acetoacetic acid as low as 2.5-5 mg/dL (0.25-0.5 mmol/L).
Specific Gravity (SG)	45 seconds	bromthymol blue indicator; buffer and non-reactive ingredients; poly (methyl vinyl ether/maleic anhydride); sodium hydroxide	Determines urine specific gravity between 1.000 and 1.030. Results correlate with values obtained by refractive index method within ± 0.005.
Blood (BLO)	60 seconds	3,3',5,5'-tetramethylbenzidine (TMB); diisopropylbenzene dihydroperoxide; buffer and non-reactive ingredients	Detects free hemoglobin as low as 0.018-0.060 mg/dL or 5-10 Ery/µL in urine specimens with ascorbic acid content of < 50 mg/dL.
pH	60 seconds	methyl red sodium salt; bromthymol blue; non-reactive ingredients	Permits the quantitative differentiation of pH values within the range of 5-9.
Protein (PRO)	60 seconds	tetrabromophenol blue; buffer and non-reactive ingredients	Detects albumin as low as 7.5-15 mg/dL (0.075-0.15 g/L).
Urobilinogen (URO)	60 seconds	p-diethylaminobenzaldehyde; buffer and non-reactive ingredients	Detects urobilinogen as low as 0.2-1.0 mg/dL (3.5-17 µmol/L).
Nitrite (NIT)	60 seconds	p-arsanilic acid; N-(1-naphthyl) ethylenediamine; non-reactive ingredients	Detects sodium nitrite as low as 0.05-0.1 mg/dL in urine with a low specific gravity and less than 30 mg/dL ascorbic acid.
Leukocytes (LEU)	120 seconds	derivatized pyrrole amino acid ester; diazonium salt; buffer; non-reactive ingredients	Detects leukocytes as low as 9-15 white blood cells Leu/µL in clinical urine.

The performance characteristics of the Urinalysis Reagent Strips (Urine) have been determined in both laboratory and clinical tests. Parameters of importance to the user are sensitivity, specificity, accuracy and precision. Generally, this test has been developed to be specific for the parameters to be measured with the exceptions of the interferences listed. Please refer to the Limitations section in this package insert.

Interpretation of visual results is dependent on several factors: the variability of color perception, the presence or absence of inhibitory factors, and the lighting conditions when the strip is read. Each color block on the chart corresponds to a range of analyte concentrations.

PRECAUTIONS

- For *in vitro* diagnostic use only. Do not use after the expiration date.
- The strip should remain in the closed canister until use.
- Do not touch the reagent areas of the strip.
- Discard any discolored strips that may have deteriorated.
- All specimens should be considered potentially hazardous and handled in the same manner as an infectious agent.
- The used strip should be discarded according to local regulations after testing.

STORAGE AND STABILITY

Store as packaged in the closed canister either at room temperature or refrigerated (2-30°C). Keep out of direct sunlight. The strip is stable through the expiration date printed on the canister label. Do not remove the desiccant. Remove only enough strips for immediate use. Replace cap immediately and tightly. **DO NOT FREEZE.** Do not use beyond the expiration date.

Note: Once the canister has been opened, the remaining strips are stable for up to 3 months. Stability may be reduced in high humidity conditions.

SPECIMEN COLLECTION AND PREPARATION

A urine specimen must be collected in a clean and dry container and tested as soon as possible. Do not centrifuge. The use of urine preservatives is not recommended. If testing cannot be done within an hour after voiding, refrigerate the specimen immediately and let it return to room temperature before testing.

Prolonged storage of unpreserved urine at room temperature may result in microbial proliferation with resultant changes in pH. A shift to alkaline pH may cause false positive results with the protein test area. Urine containing glucose may decrease in pH as organisms metabolize the glucose.

Contamination of the urine specimen with skin cleansers containing chlorhexidine may affect protein (and to a lesser extent, specific gravity and bilirubin) test results.

MATERIALS

Materials Provided

- Strips

- Package insert

Materials Required But Not Provided

- Specimen collection container

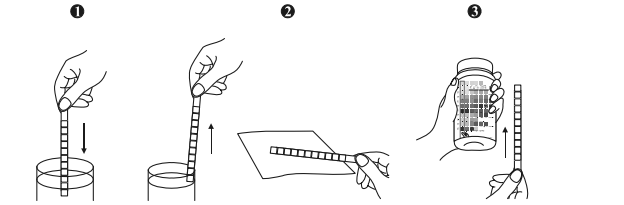
- Timer

DIRECTIONS FOR USE

Allow the strip, urine specimen, and/or controls to reach room temperature (15-30°C) prior to testing.

- Remove the strip from the closed canister and use it as soon as possible. Immediately close the canister tightly after removing the required number of strip(s). Completely immerse the reagent areas of the strip in fresh, well-mixed urine and immediately remove the strip to avoid dissolving the reagents. See illustration 1 below.
- While removing the strip from the urine, run the edge of the strip against the rim of the urine container to remove excess urine. Hold the strip in a horizontal position and bring the edge of the strip into contact with an absorbent material (e.g. a paper towel) to avoid mixing chemicals from adjacent reagent areas and/or soiling hands with urine. See illustration 2 below.
- Compare the reagent areas to the corresponding color blocks on the canister label at the specified times. Hold the strip close to the color blocks and match carefully. See illustration 3 below.

Note: Results may be read up to 2 minutes after the specified times.



INTERPRETATION OF RESULTS

Results are obtained by direct comparison of the color blocks printed on the canister label. The color blocks represent nominal values; actual values will vary close to the nominal values. In the event of unexpected or questionable results, the following steps are recommended: confirm that the strips have been tested within the expiration date printed on the canister label, compare results with known positive and negative controls and repeat the test using a new strip. If the problem persists, discontinue using the strip immediately and contact your local distributor.

QUALITY CONTROL

For best results, performance of reagent strips should be confirmed by testing known positive and negative specimens/controls whenever a new test is performed, or whenever a new canister is first opened. Each laboratory should establish its own goals for adequate standards of performance.

LIMITATIONS

Note: The Urinalysis Reagent Strips (Urine) may be affected by substances that cause abnormal urine color such as drugs containing azo dyes (e.g. Pyridium®. Azo Gantrisin®, Azo Gantanol®), nitrofurantoin (Microdantin®, Furadantin®), and riboflavin.⁸ The color development on the test pad may be masked or a color reaction may be produced that could be interpreted as false results.

Ascorbic acid: No interference is known.

Glucose: The reagent area does not react with lactose, galactose, fructose or other metabolic substances, nor with reducing metabolites of drugs (e.g. salicylates and nalidixic acid). Sensitivity may be decreased in specimens with high specific gravity (>1.025) and with ascorbic acid concentrations of ≥ 25 mg/dL. High ketone levels ≥ 100 mg/dL may cause false negative results for specimens containing a small amount of glucose (50-100 mg/dL).

Bilirubin: Bilirubin is absent in normal urine, so any positive result, including a trace positive, indicates an underlying pathological condition and requires further investigation. Reactions may occur with urine containing large doses of chlorpromazine or rifampin that might be mistaken for positive bilirubin.⁹ The presence of bilirubin-derived bile pigments may mask the bilirubin reaction. This phenomenon is characterized by color development on the test patch that does not correlate with the colors on the color chart. Large concentrations of ascorbic acid may decrease sensitivity.

Ketone: The test does not react with acetone or β-hydroxybutyrate.⁸ Urine specimens of high pigment, and other substances containing sulfindryl groups may occasionally give reactions up to and including trace (±).

Specific Gravity: Ketoacidosis or protein higher than 300 mg/dL may cause elevated results. Results are not affected by non-ionic urine components such as glucose. If the urine has a pH of 7 or greater, add 0.005 to the specific gravity reading indicated on the color chart.

Blood: A uniform blue color indicates the presence of myoglobin, hemoglobin or hemolyzed erythrocytes.⁸ Scattered or compacted blue spots indicate intact erythrocytes. To enhance accuracy, separate color scales are provided for hemoglobin and for erythrocytes. Positive results with this test are often seen with urine from menstruating females. It has been reported that urine of high pH reduces sensitivity, while moderate to

high concentration of ascorbic acid may inhibit color formation. Microbial peroxidase, associated with urinary tract infection, may cause a false positive reaction. The test is slightly more sensitive to free hemoglobin and myoglobin than to intact erythrocytes.

pH: If the procedure is not followed and excess urine remains on the strip, a phenomenon known as "runover" may occur, in which the acid buffer from the protein reagent will run onto the pH area, causing the pH result to appear artificially low. pH readings are not affected by variations in urinary buffer concentration.

Protein: Any green color indicates the presence of protein in the urine. This test is highly sensitive for albumin, and less sensitive to hemoglobin, globulin and mucoprotein.⁸ A negative result does not rule out the presence of these other proteins. False positive results may be obtained with highly buffered or alkaline urine. Contamination of urine specimens with quaternary ammonium compounds or skin cleansers containing chlorhexidine may produce false positive results.⁸ The urine specimens with high specific gravity may give false negative results.

Urobilinogen: All results lower than 1 mg/dL urobilinogen should be interpreted as normal. A negative result does not at any time preclude the absence of urobilinogen. The reagent area may react with interfering substances known to react with Ehrlich's reagent, such as p-aminosalicylic acid and sulfonamides.⁹ False negative results may be obtained if formalin is present. The test cannot be used to detect porphobilinogen.

Nitrite: The test is specific for nitrite and will not react with any other substance normally excreted in urine. Any degree of uniform pink to red color should be interpreted as a positive result, suggesting the presence of nitrite. Color intensity is not proportional to the number of bacteria present in the urine specimen. Pink spots or pink edges should not be interpreted as a positive result. Comparing the reacted reagent area on a white background may aid in the detection of low nitrite levels, which might otherwise be missed. Ascorbic acid above 30 mg/dL may cause false negatives in urine containing less than 0.05 mg/dL nitrite ions. The sensitivity of this test is reduced for urine specimens with highly buffered alkaline urine or with high specific gravity. A negative result does not at any time preclude the possibility of bacteruria. Negative results may occur in urinary tract infections from organisms that do not contain reductase to convert nitrate to nitrite; when urine has not been retained in the bladder for a sufficient length of time (at least 4 hours) for reduction of nitrate to nitrite to occur; when receiving antibiotic therapy or when dietary nitrate is absent.

Leukocytes: The result should be read between 60-120 seconds to allow for complete color development. The intensity of the color that develops is proportional to the number of leukocytes present in the urine specimen. High specific gravity or elevated glucose concentrations (≥ 2,000 mg/dL) may cause test results to be artificially low. The presence of cephalixin, cephalothin, or high concentrations of oxalic acid may also cause test results to be artificially low. Tetracycline may cause decreased reactivity, and high levels of the drug may cause a false negative reaction. High urinary protein may diminish the intensity of the reaction color. This test will not react with erythrocytes or bacteria common in urine.⁸

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Index of Symbols			
	Consult instructions for use		Tests per kit
	For <i>in vitro</i> diagnostic use only		Use by
	Store between 2-30°C		Lot Number
	Authorized Representative		Catalog #

**ACON Laboratories, Inc.**
10125 Mesa Rim Road,
San Diego, CA 92121, USA

**MDSS GmbH**
Schiffgraben 41
30175 Hannover, Germany



浙江东方基因生物制品股份有限公司
Zhejiang Orient Gene Biotech Co.,LTD

STATEMENT

We, Zhejiang Orient Gene Biotech Co., Ltd , having a registered office at 3787#, East Yangguang Avenue, Dipu Street Anji 313300, Huzhou, Zhejiang, China assign SRL SANMEDICO having a registered office at A. Corobceanu street 7A, apt. 9, Chişinău MD-2012, Moldova, as non-exclusive authorized representative for Orient Gene Brand product in correspondence with the conditions of directive 98/79/EEC.

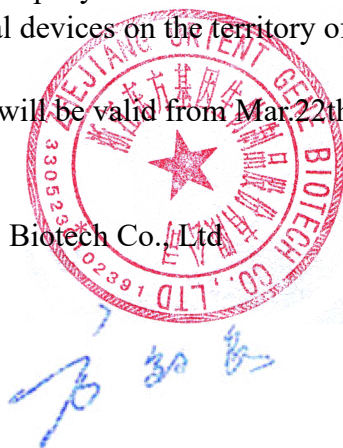
We declare that the company mentioned above is authorized to register, notify, renew or modify the registration of medical devices on the territory of the Republic of Moldova.

This Statement letter will be valid from Mar.22th,2024 to Mar.21th, 2025.

Zhejiang Orient Gene Biotech Co.,Ltd

General Manager:

Date:2024/3/22



地址：浙江省湖州市安吉县递铺镇阳光大道东段 3787 号
Add: 3787#, East Yangguang Avenue, Dipu Street Anji 313300, Huzhou, Zhejiang, China
电话 Tel:+86-572-5226111 传真 Fax: +86-572-5226222 邮编 P.C.:313300



Certificate

No. Q5 092305 0001 Rev. 02

Holder of Certificate: **Zhejiang Orient Gene Biotech Co., Ltd.**
3787#, East Yangguang Avenue, Dipu Street Anji
313300 Huzhou, Zhejiang
PEOPLE'S REPUBLIC OF CHINA

Certification Mark:



Scope of Certificate: **Design and Development, Production and Distribution of In Vitro Diagnostic Reagent and Instrument for the Detection of Drugs of Abuse, Fertility, Infectious Diseases, Oncology, Biochemistry, Cardiac Diseases, Allergic Disease based on Rapid Test, PCR and Liquid Biochip Method.**

The Certification Body of TÜV SÜD Product Service GmbH certifies that the company mentioned above has established and is maintaining a quality management system, which meets the requirements of the listed standard(s). All applicable requirements of the testing and certification regulation of TÜV SÜD Group have to be complied with. For details and certificate validity see: www.tuvsud.com/ps-cert?q=cert:Q5 092305 0001 Rev. 02

Report No.: SH2398804

Valid from: 2024-03-17

Valid until: 2027-03-16

Date, 2024-03-01

Christoph Dicks
Head of Certification/Notified Body

Certificate

No. Q5 092305 0001 Rev. 02

Applied Standard(s): ISO 13485:2016
(EN ISO 13485:2016/AC:2018, EN ISO 13485:2016/A11:2021)
Medical devices - Quality management systems -
Requirements for regulatory purposes

Facility(ies): **Zhejiang Orient Gene Biotech Co., Ltd.**
3787#, East Yangguang Avenue, Dipu Street Anji, 313300
Huzhou, Zhejiang, PEOPLE'S REPUBLIC OF CHINA

See Scope of Certificate



Benannt durch/Designated by
Zentralstelle der Länder
für Gesundheitsschutz
bei Arzneimitteln und
Medizinprodukten
www.zlg.de
ZLG-BS-245.10.07



Product Service

EC Certificate

EC Design-Examination Certificate

Directive 98/79/EC on In Vitro Diagnostic Medical Devices (IVDD), Annex IV (4) (List A)

No. V7 092378 0009 Rev. 00

Manufacturer:

**Healgen Scientific Limited
Liability Company**

3818 Fuqua Street
Houston TX 77047
USA

Product:

Screening test for Hepatitis C marker

The Certification Body of TÜV SÜD Product Service GmbH declares that a design examination has been carried out on the respective devices in accordance with IVDD Annex IV (4). The design of the devices conforms to the requirements of this Directive. All applicable requirements of the testing and certification regulation of TÜV SÜD Group have to be complied with. For details and certificate validity see: [www.tuvsud.com/ps-cert?q=cert:V7 092378 0009 Rev. 00](http://www.tuvsud.com/ps-cert?q=cert:V7_092378_0009_Rev.00)

Report No.:

713234651

Valid from:

2022-04-22

Valid until:

2025-05-26

Date,

2022-04-22

Christoph Dicks
Head of Certification/Notified Body



EC Certificate

EC Design-Examination Certificate

Directive 98/79/EC on In Vitro Diagnostic Medical Devices (IVDD), Annex IV (4) (List A)

No. V7 092378 0009 Rev. 00

Model(s):

HCV Hepatitis C Virus Rapid Test

Facility(ies):

Zhejiang Orient Gene Biotech Co., Ltd.
3787#, East Yangguang Avenue, Dipu Street Anji,
313300 Huzhou, Zhejiang, PEOPLE'S REPUBLIC OF CHINA

Parameters:

Model Name:

Model No.:

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HCV Hepatitis C Virus Rapid Test
(Serum / Plasma) (Cassette)

GCHCV-302a

HCV Hepatitis C Virus Rapid Test
(Whole Blood /Serum / Plasma) (Cassette)

GCHCV-402a



EC Declaration of Conformity

In accordance with Directive 98/79/EC

Legal Manufacturer: Healgen Scientific Limited Liability Company

Legal Manufacturer Address: 3818 Fuqua Street, Houston, TX 77047, USA.

Declares, that the products
Product Name and Model(s)

Orient Gene HCV Hepatitis C Virus Rapid Test (Serum/Plasma) (Cassette)	GCHCV-302a
Orient Gene HCV Hepatitis C Virus Rapid Test (Whole blood/Serum/Plasma)(Cassette)	GCHCV-402a

EDMA Code: 15 70 02 02

Classification: Annex II List A
Conformity assessment route: Annex IV (Full Quality Assurance)

Compliance of the designated product with the Directive 98/79/EC has been assessed and certified by the Notified Body

Notified Body: TÜV SÜD Product Service GmbH

Notified Body Address: Munich Branch Ridlerstraße 65 80339 München Germany

EC Certificate No.: V1 092378 0004 Rev. 02 Valid until: 2025-05-26

EC Design-Examination Certificate No.: V7 092378 0009 Rev. 00 Valid until: 2025-05-26

It bears the mark

CE 0123

We, the Manufacturer, herewith declare with sole responsibility that our product/s mentioned above meet/s the provisions of the Directive 98/79/EC of the European Parliament and of the Council on In-Vitro Diagnostic Medical Devices.

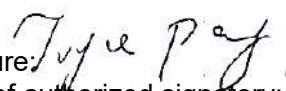
We hereby explicitly appoint

EC Representative Name: QARAD b.v.b.a.

EC Representative Address: Cipalstraat 3, B-2440 Geel, Belgium

to act as our European Authorized Representative as defined in the aforementioned Directive.

I, the undersigned, hereby declare that the medical devices specified above conform with the directive 98/79/EC on in vitro diagnostic medical devices and pertinent essential requirements

Signature: 

Name of authorized signatory: Joyce Pang

Position held in the company: Vice-President

Date: 2022.4.22



浙江东方基因生物制品股份有限公司
Zhejiang Orient Gene Biotech Co., LTD



CE-DOC-OG106
Version 1.0

EC Declaration of Conformity

In accordance with Directive 98/79/EC

Legal Manufacturer: *Zhejiang Orient Gene Biotech Co., Ltd*

Legal Manufacturer Address: *3787#, East Yangguang Avenue, Dipu Street,
Anji 313300, Huzhou, Zhejiang, China*

Declares, that the products
Product Name and Model(s)

Procalcitonin Rapid Test Cassette (Whole Blood/Serum/Plasma)	GDPCT-402a
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Classification: *Other*

Conformity assessment route: *Annex III (EC DECLARATION OF CONFORMITY)*

We, the Manufacturer, herewith declare with sole responsibility that our product/s mentioned above meet/s the provisions of the Directive 98/79/EC of the European Parliament and of the Council on In-Vitro Diagnostic Medical Devices.

We hereby explicitly appoint

EC Representative's Name: *Shanghai International Holding Corp. GmbH (Europe)*

EC Representative's Address: *Eiffestrasse 80, 20537 Hamburg, Germany*

to act as our European Authorized Representative as defined in the aforementioned Directive.

I, the undersigned, hereby declare that the medical devices specified above conform with the directive 98/79/EC on in vitro diagnostic medical devices and pertinent essential requirements

Date Signed: August 7, 2018

Name of authorized signatory: *Joyce Pang*
Position held in the company: *Vice-President*

HCV Hepatitis C Virus Rapid Test (Whole blood/Serum/Plasma)(Cassette)

CE 0123

REF GCHCV-402a

INTENDED USE

The HCV Hepatitis C Virus Rapid Test (Whole blood/Serum/Plasma)(Cassette) is a sandwich lateral flow chromatographic immunoassay for the qualitative detection of antibodies (IgG, IgM, and IgA) to Hepatitis C virus (HCV) in human whole blood, serum or plasma. It is intended to be used as a screening test and as an aid in the diagnosis of infection with HCV. Any reactive specimen with the HCV Hepatitis C Virus Rapid Test Cassette must be confirmed with alternative testing method(s) and clinical findings.

INTRODUCTION

Hepatitis C Virus (HCV) is a small, enveloped, positive-sense, single-stranded RNA virus. Antibody to HCV is found in over 80% of patients with well-documented non-A, non-B hepatitis. Conventional methods fail to isolate the virus in cell culture or visualize it by electron microscope. Cloning the viral genome has made it possible to develop serologic assays that use recombinant antigens (1, 2). Compared to the first generation HCV EIAs using single recombinant antigen, multiple antigens using recombinant protein and/or synthetic peptides have been added in new serologic tests to avoid nonspecific cross-reactivity and to increase the sensitivity of the HCV antibody tests (3, 4). HCV Hepatitis C Virus Rapid Test (Whole blood/Serum/Plasma)(Cassette) is a rapid test to qualitatively detect the presence of antibody to HCV in a whole blood, serum or plasma specimen. The test utilizes a combination of recombinant antigen to selectively detect elevated levels of HCV antibodies in whole blood, serum or plasma.

PRINCIPLE

The HCV Hepatitis C Virus Rapid Test Cassette is a lateral flow chromatographic immunoassay based on the principle of the double antigen–sandwich technique. The test Cassette consists of: 1) a burgundy colored conjugate pad containing HCV antigens conjugated with colloidal gold (HCV Ag conjugates) and rabbit IgG-gold conjugates, 2) a nitrocellulose membrane Cassette containing a test band (T band) and a control band (C band). The T band is pre-coated with non-conjugated HCV antigens, and the C band is pre-coated with goat anti-rabbit IgG. When an adequate volume of test specimen is dispensed into the sample well of the Cassette, the specimen migrates by capillary action across the Cassette. The antibodies: either the IgG, the IgM, or the IgA, to HCV if present in the specimen will bind to the HCV Ag conjugates. The immunocomplex is then captured on the membrane by the precoated HCV antigens, forming a burgundy colored T band, indicating a HCV Ab positive test result. Absence of the T band suggests a negative result. The test contains an internal control (C band) which should exhibit a burgundy colored band of the immunocomplex of goat anti-rabbit IgG and rabbit IgG-gold conjugate regardless the presence of any antibodies to HCV. Otherwise, the test result is invalid and the specimen must be retested with another Cassette.

PRODUCT CONTENTS

HCV Hepatitis C Virus Rapid Test (Whole blood/Serum/Plasma)(Cassette) containing HCV antigen (HCV antigen includes core, NS3, NS4 and NS5 segment) coated particles and HCV antigen (HCV recombinant antigen includes core, NS3, NS4 and NS5 segment) coated on the membrane.

MATERIALS SUPPLIED

- 25 sealed pouches each containing a test cassette, a pipette dropper and a desiccant (Test Cassette T band is pre-coated with non-conjugated HCV antigens, and the C band is pre-coated with goat anti-rabbit IgG on the nitrocellulose and coupled to colloidal gold on label pad)
- 1 Package insert

- 1 Buffer (4 mL) (Casein-salt: 1%, NaCl: 0.9%, Na₂HPO₄: 0.286%, NaN₃: 0.5%)



Warning

Warning: 0.5% NaN₃
Harmful if swallowed; Harmful to aquatic life with long lasting effects
Prevention
Wash face, hands and any exposed skin thoroughly after handling Wear protective gloves/protective clothing/eye protection/face protection
Do not breathe dust/fume/gas/mist/vapors/spray
Do not eat, drink or smoke when using this product
Avoid release to the environment.
Response
IF SWALLOWED: rinse mouth. Do NOT induce vomiting.
Get medical attention/advice if you feel unwell

MATERIAL REQUIRED BUT NOT PROVIDED

- Specimen collection containers
- Sterile lancets (for fingerstick whole blood only)
- Centrifuge (for plasma only)
- Timer
- Heparinized capillary tubes and dispensing bulb (for fingerstick whole blood only)

STORAGE AND STABILITY

The kit can be stored at room temperature or refrigerated (2-30°C). The test Cassette is stable through the expiration date printed on the sealed pouch. The test Cassette must remain in the sealed pouch until use. DO NOT FREEZE. Do not use beyond the expiration date.

WARNINGS AND PRECAUTIONS

- For professional *in vitro* diagnostic use only. Do not use after expiration date.
- Warning: the reagents in this kit contain sodium azide which may react with lead or copper plumbing to form potentially explosive metal azides. When disposing of such reagents, always flush with large volumes of water to prevent azide build-up.
- Do not use it if the tube/pouch is damaged or broken.
- Test is for single use only. Do not re-use under any circumstances.
- Handle all specimens as if they contain infectious agents. Observe established precautions against microbiological hazards throughout testing and follow the standard procedures for proper disposal of specimens.
- Wear protective clothing such as laboratory coats, disposable gloves and eye protection when specimens are assayed.
- Humidity and temperature can adversely affect results.
- Do not perform the test in a room with strong air flow, i.e. an electric fan or strong airconditioning.

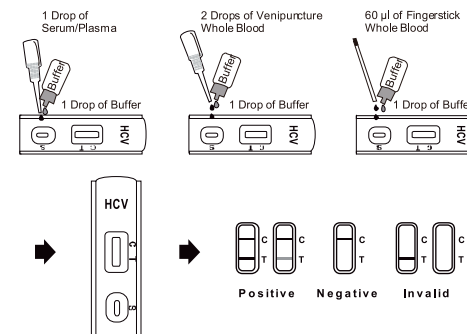
SPECIMEN COLLECTION

- The HCV Hepatitis C Virus Rapid Test (Whole Blood/Serum/Plasma) (Cassette) can be performed using whole blood (from venipuncture and fingerstick), serum or plasma.
- For venipuncture whole blood and plasma: K-EDTA, Sodium Heparin, Sodium citrate Sterile, and Lithium heparin should be used as the anticoagulant. Other anticoagulants have not been tested and may give incorrect results.
- To collect Fingerstick Whole Blood specimens:
 - Wash the patient's hand with soap and warm water or clean with an alcohol wipe . Allow to dry.
 - Massage the hand without touching the puncture site by rubbing down the hand towards the fingertip of the middle or ring finger.
 - Puncture the skin with a new sterile lancet for each person. Wipe away the first sign of blood.
 - Gently rub the hand from wrist to palm to finger to form a rounded drop of blood over the puncture site.
 - Add the Fingerstick Whole Blood specimen to the test device by using a capillary tube:
 - Touch the end of the capillary tube to the blood until filled to approximately 60 µL. Avoid air bubbles.
 - Place the bulb onto the top end of the capillary tube, then squeeze the bulb to dispense the whole blood into the specimen well (S) of the test device.
 - Separate serum or plasma from blood as soon as possible to avoid hemolysis. Use only clear, nonhemolyzed specimens.
- Testing should be performed immediately after specimen collection. Do not leave the specimens at room temperature for prolonged periods. Serum and plasma specimens may be stored at 2-8°C for up to 3 days and may be stored at -20°C for 6 months. Whole blood collected by venipuncture should be stored at 2-8°C if the test is to be run within 2 days of collection. Do not freeze whole blood specimens. Whole blood collected by fingerstick should be tested immediately.
- Bring specimens to room temperature prior to testing. Frozen specimens must be completely thawed and mixed well prior to testing. Specimens should not be frozen and thawed repeatedly.
- If specimens are to be shipped, they should be packed in compliance with usual regulations for transportation of etiological agents.

TEST PROCEDURE

Allow test cassette, specimen, buffer and/or controls to equilibrate to room temperature (15-30°C) prior to testing.

- Remove the test Cassette from the foil pouch and use it as soon as possible. Best results will be obtained if the assay is performed within one hour.
- Place the test Cassette on a clean and level surface.
For Serum or Plasma Specimens: Hold the dropper vertically and transfer 1 drop of serum or plasma (approximately 30 µL) to the specimen well (S) of the test Cassette, then add 1 drop of buffer (approximately 40 µL) and start the timer. See illustration below.
For Venipuncture Whole Blood Specimens: Hold the dropper vertically and transfer 2 drops of venipuncture whole blood (approximately 60 µL) to the specimen well (S) of the test Cassette, then add 1 drop of buffer (approximately 40 µL) and start the timer. See illustration below.
For Fingerstick Whole Blood specimens: To use a capillary tube: Fill the capillary tube and transfer approximately 60 µL of fingerstick whole blood specimen to the specimen well (S) of the test device, then add 1 drops of buffer (approximately 40 µL) and start the timer. See illustration below.
- Wait for the red line(s) to appear. The result should be read at 15 minutes. Do not interpret the result after 30 minutes.



INTERPRETATION OF RESULTS

(Please refer to the illustration above)

Positive: Two lines appear. One colored line should be in the control line region (C) and another apparent colored line should be in the test line region (T).

Negative: One colored line appears in the control line region (C). No line appears in the test line region (T).

Invalid: Control line fails to appear. Insufficient specimen volume or incorrect procedural techniques are the most likely reasons for control line failure. Review the procedure and repeat the test with a new test Cassette. If the problem persists, discontinue using the test kit immediately and contact your local distributor.

QUALITY CONTROL

A procedural control is included in the test. A red line appearing in the control region (C) is the internal procedural control. It confirms sufficient specimen volume and correct procedural technique. Control standards are not supplied with this test. However, it is recommended that positive and negative controls are sourced from a local competent authority and tested as a good laboratory practice, to confirm the test procedure and verify the test performance.

LIMITATIONS

1. The HCV Hepatitis C Virus Rapid Test (Whole blood/Serum/Plasma)(Cassette) is for *in vitro* diagnostic use only. This test should be used for the detection of antibodies to HCV in whole blood, serum or plasma specimen.
2. The HCV Hepatitis C Virus Rapid Test (Whole blood/Serum/Plasma)(Cassette) will only indicate the presence of antibodies to HCV in the specimen and should not be used as the sole criteria for the diagnosis of Hepatitis C viral infection.
3. As with all diagnostic tests, all results must be considered with other clinical information available to the physician.
4. If the test result is negative and clinical symptoms persist, additional follow-up testing using other clinical methods is recommended. A negative result at any time does not preclude the possibility of Hepatitis C Virus infection.
5. A negative result can occur if the quantity of the antibodies to HCV present in the specimen is below the detection limits of the assay, or the antibodies that are detected are not present during the stage of disease in which a sample is collected.
6. Some specimens containing unusually high titer of heterophile antibodies or rheumatoid factor may affect expected results.
7. As with all diagnostic tests, a definitive clinical diagnosis should not be based on the results of a single test, but should only be made by the physician after all clinical and laboratory findings have been evaluated.
8. Results should not be used to determine the genotype of HCV infections.
9. Due to possible cross reactivity, the appearance of lines in T line does not necessarily indicate co-infection from IgG, IgM or IgA, nor can it identify the serotype.
10. The recommended anticoagulants are K₂EDTA, Sodium Heparin, Sodium citrate Sterile and Lithium heparin for venous whole blood. Other anticoagulants have not been evaluated with this test.

PERFORMANCE CHARACTERISTICS

Relative Sensitivity

A total of 506 HCV positive specimens were tested using the HCV Hepatitis C Virus Rapid Test (Whole blood/Serum/Plasma)(Cassette) and a commercially available test (Table 1). The relative sensitivity of the test is >99.9% (95% confidence interval: 99.27% – 100%).

Table 1: Sensitivity of HCV Hepatitis C Virus Rapid Test (Whole blood/Serum/Plasma)(Cassette)

Population	Specimen Type	Number of Specimens Tested	Positive by HCV Hepatitis C Virus Rapid Test	Positive by Commercially Available Test
Anti-HCV (any genotype)	plasma	329	329/329 (100%)	329/329 (100%)
Anti-HCV (any genotype)	Serum	26	26/26 (100%)	26/26 (100%)
Anti-HCV (genotype 1, 2, 3, 4 (non-subtype A), 4, 5, 6)	Serum/Plasma	151	151/151 (100%)	151/151 (100%)
Total		506	506/506 (100%)	506/506 (100%)

30 Seroconversion panels have been done and details of the 30 seroconversion are in the table below.

No.	Panel	Specimens No.	Results
1	PHV907	7	Positive from 0 days since first bleed
2	PHV908	13	Positive from 3 days since first bleed
3	PHV206(M)	25	/
4	PHV911(M)	5	Positive from 3 days since first bleed
5	PHV919	7	Positive from 28 days since first bleed
6	PHV920	10, No. 2 can't be got because of out of stock from the vendor	Positive from 16 days since first bleed
7	HCV9047	10	Positive from 28 days since first bleed

8	HCV9046	5	Positive from 69 days since first bleed
9	HCV6229	8	Positive from 17 days since first bleed
10	HCV10041	3	Positive from 6 days since first bleed
11	HCV9041	8	Positive from 62 days since first bleed
12	HCV9045	8	Positive from 37 days since first bleed
13	HCV6222	3	Positive from 40 days since first bleed
14	HCV6224	8	Positive from 19 days since first bleed
15	HCV6227	7	Positive from 75 days since first bleed
16	HCV6228	12	Positive from 31 days since first bleed
17	HCV10071	7	Positive from 84 days since first bleed
18	HCV6220	6	Positive from 18 days since first bleed
19	HCV10185	5	Positive from 130 days since first bleed
20	HCV10235	5	Positive from 96 days since first bleed
21	HCV6215	4	Positive from 20 days since first bleed
22	HCV9042	6	Positive from 8 days since first bleed
23	HCV9058	5	Positive from 10 days since first bleed
24	HCV9094	5	Positive from 9 days since first bleed
25	HCV9095	5	Positive from 10 days since first bleed
26	HCV9055	11	Positive from 65 days since first bleed
27	HCV9054	10	Positive from 72 days since first bleed
28	HCV9044	6	Positive from 21 days since first bleed
29	HCV10165	9	Positive from 19 days since first bleed
30	HCV6226	12	Positive from 39 days since first bleed

Relative Specificity

A total of HCV 1259 negative specimens were tested using the HCV Hepatitis C Virus Rapid Test (Whole blood/Serum/Plasma)(Cassette) and a commercially available test (Table 2). The relative specificity of the test is >99.9% (95% confidence interval: 99.71% – 100%).

Table 2: Specificity of the HCV Hepatitis C Virus Rapid Test (Whole blood/Serum/Plasma)(Cassette)

Population	Specimens Tested	Number of Specimens Tested	Negative by HCV Hepatitis C Virus Rapid Test	Negative by Commercially Available Test
Clinical Negative	Serum/plasma	202	202/202 (100%)	202/202 (100%)
Potentially cross-reacting	Serum/Plasma	30	30/30 (100%)	30/30 (100%)
Unselected Donors	Serum	1000	1000/1000 (100%)	1000/1000 (100%)
Inhibition Panel	Serum	27	27/27 (100%)	27/27 (100%)
Total		1259	1259/1259 (100%)	1259/1259 (100%)

Whole Blood vs. Serum vs. Plasma

Total 25 clinical negative samples (whole blood, serum, plasma) have been collected from patients in local hospital. The whole blood collected and separated into three tubes. One was stored as whole blood. One was collected into tube for plasma, one was collected into tube for serum (Table 3). There is a very good correlation of results between whole blood, serum, and plasma with HCV negative samples.

Table 3: A Comparison of HCV Hepatitis C Virus Rapid Test (Whole blood/Serum/Plasma)(Cassette) Specificity in negative Whole Blood and Paired Serum and Plasma Specimens

Specimen Type	Number of Specimens Tested	Negative by HCV Ab
Serum	25	25/25 (100%)
Plasma	25	25/25 (100%)
Whole blood	25	25/25 (100%)

A total of 25 positive specimens (whole blood, serum, plasma) were tested using the HCV Hepatitis C Virus Rapid Test (Whole blood/Serum/Plasma)(Cassette) (Table 4). There is a very good correlation of results between whole blood and paired plasma with HCV positive samples.

Table 4: A Comparison of HCV Hepatitis C Virus Rapid Test (Whole blood/Serum/Plasma)(Cassette) Specificity in positive Whole Blood and Paired Serum and Plasma Specimens.

Specimen Type	Number of Specimens Tested	Positive by HCV Ab
Serum	25	25/25 (100%)
Plasma	25	25/25 (100%)
Whole blood	25	25/25 (100%)

Precision

Intra Assay

Within-run precision has been determined by using 20 replicates of four specimens: a negative, a low positive, medium positive and a high positive. The negative, low positive, medium positive and high positive values were correctly identified >99% of the time.

Inter-Assay

Between-run precision has been determined by 5 independent assays on the same four specimens: a negative, a low positive, medium positive and a high positive. Three different lots of the HCV Hepatitis C Virus Rapid Test (Whole blood/Serum/Plasma)(Cassette) have been tested using negative, low positive, medium positive and high positive specimens. The specimens were correctly identified >99% of the time.

Cross Reactivity

No cross-reactivity was observed when samples positive for other diseases such as HIV, Syphilis, Infectious Mononucleosis, HBV, Rheumatoid Factor, HAMA, Hyper IgG, Hyper IgM, anti-HAV, anti-HSV2, anti-HEV, anti-EBV and anti-CMV were tested.

Interfering Substances

No interference was observed in samples with high concentrations of Uric acid, Ascorbic Acid, Hemoglobin, Gentistic Acid, Acetaminophen, Oxalic Acid, Albumin, Caffeine, Bilirubin, EDTA, Aspirin and Methanol.

Analytes	Conc	Analytes	Conc
Control	0	Control	0
Uric acid	0.15 mg/mL	Albumin	20 mg/mL
Ascorbic Acid	0.2 mg/mL	Caffeine	0.2 mg/mL
Hemoglobin	5.0 mg/mL	Bilirubin	0.3 mg/mL
Gentistic Acid	0.2 mg/mL	EDTA	0.2 mg/mL
Acetaminophen	1.0 mg/mL	Aspirin	0.2 mg/mL
Oxalic Acid	0.2 mg/mL	Methanol	1.0%

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INDEX OF SYMBOLS

	Consult instructions for use		Tests per kit		Authorized Representative
	For <i>in vitro</i> diagnostic use only		Use by		Do not reuse
	Store between 2-30°C		Lot Number		Catalog #
	Manufacturer		Warning		

 Healgen Scientific Limited Liability Company
Address: 3818 Fuqua Street, Houston, TX 77047, USA.
Tel: +1 713-733-8088 Fax: +1 713-733-8848
Website: www.healgen.com

 QARAD b.v.b.a.
Cipalstraat 3, B-2440 Geel, Belgium

Procalcitonin Semi-Quantitative Rapid Test Cassette (Whole Blood/Serum/Plasma)



A rapid test for the Semi-Quantitative detection of Procalcitonin in whole blood, serum or plasma specimens.

For professional *in vitro* diagnostic use only.

INTENDED USE

The Procalcitonin Semi-Quantitative Rapid Test Cassette (Whole Blood/Serum/Plasma) is used for semi-quantitative determination and monitoring of PCT concentrations in whole blood/serum/plasma specimens.

SUMMARY

The Procalcitonin (PCT) is a peptide hormone mainly produced by the C cells of the thyroid and certain endocrine cells of the lung. Under normal expression conditions, procalcitonin is immediately cleaved into three specific fragments, an N terminal residue, calcitonin and katacalcin. Levels of unprocessed procalcitonin rise significantly after bacterial infection, trauma or shock.

The Procalcitonin Semi-Quantitative Rapid Test Cassette (Whole Blood/Serum/Plasma) is a rapid test that semi-quantitatively detects the presence of Procalcitonin in whole blood, plasma or serum specimens at the sensitivity of 0.5ng/mL, 2ng/mL and 10ng/mL. The test utilizes a combination of monoclonal antibodies to selectively detect elevated levels of Procalcitonin in whole blood, plasma or serum. At the level of claimed sensitivity, the Procalcitonin Semi-Quantitative Rapid Test Cassette (Whole Blood/Serum/Plasma) shows no cross-reactivity interference from the structurally related CRP or others at high physiological levels.

PRINCIPLE

The Procalcitonin Semi-Quantitative Rapid Test Cassette (Whole Blood/Serum/Plasma) detects Procalcitonin through visual interpretation of color development on the internal strip. Anti-PCT antibodies are immobilized on the test region of the membrane. During testing, the specimen reacts with anti-PCT antibodies conjugated to colored particles and precoated on the sample pad of the test. The mixture then migrates through the membrane by capillary action, and interacts with reagents on the membrane. If Test band 3 (T3) appears, it indicates that the PCT level in the specimen is between 0.5-2.0ng/ml. If the Test band 3 and 2 (T3 and T2) appear, it indicates that the PCT level in the specimen is between 2.0-10.0 ng/ml. If all the Test bands (T1, T2, T3), it indicates that the PCT level is above 10.0 ng/ml. The appearance of control line serves as a procedural control, indicating that the proper volume of specimen has been added and membrane wicking has occurred.

REAGENT

The test contains anti- Procalcitonin particles and anti- Procalcitonin coated on the membrane.

MATERIALS PROVIDED

25 Sealed pouches each containing a test cassette, a dropper and a desiccant

1 Buffer, 4.0 mL

1 Package insert

MATERIALS REQUIRED BUT NOT PROVIDED

1. Specimen collection container 2. Timer 3. Centrifuge

PRECAUTIONS

- For professional *in vitro* diagnostic use only.
- Do not use after the expiration date indicated on the package. Do not use the test if the foil pouch is damaged. Do not reuse tests.
- This kit contains products of animal origin. Certified knowledge of the origin and/or sanitary state of the animals does not completely guarantee the absence of transmissible pathogenic agents. It is therefore recommended that these products be treated as potentially infectious, and handled observing usual safety precautions (e.g., do not ingest or inhale).
- Avoid cross-contamination of specimens by using a new specimen collection container for each specimen obtained.
- Read the entire procedure carefully prior to any testing.
- Do not eat, drink or smoke in the area where the specimens and kits are handled. Handle all specimens as if they contain infectious agents. Observe established precautions against microbiological hazards throughout the procedure and follow standard procedures for proper disposal of specimens. Wear protective clothing such as laboratory coats, disposable gloves and eye protection when specimens are assayed.
- Do not interchange or mix reagents from different lots.
- Humidity and temperature can adversely affect results.
- Used testing materials should be discarded in accordance with local regulations.

STORAGE AND STABILITY

- The kit should be stored at 2-30°C until the expiry date printed on the sealed pouch.
- The test must remain in the sealed pouch until use.

Do not freeze.

Care should be taken to protect the components of the kit from contamination. Do not use if there is evidence of microbial contamination or precipitation. Biological contamination of dispensing equipment, containers or reagents can lead to false results.

SPECIMEN COLLECTION AND PREPARATION

- The Procalcitonin Semi-Quantitative Rapid Test Cassette (Whole Blood/Serum/Plasma) can be performed using whole blood, serum or plasma.
- Separate serum or plasma from blood as soon as possible to avoid hemolysis. Use only clear, non-hemolyzed specimens.
- Testing should be performed immediately after specimen collection. Do not leave the specimens at room temperature for

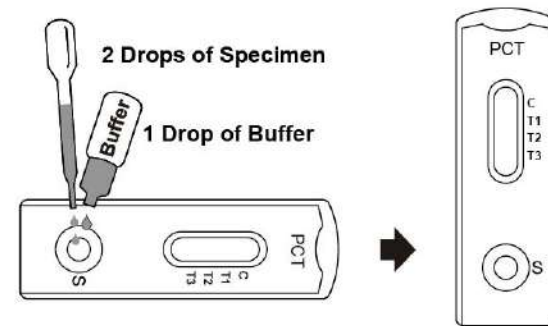
prolonged periods. Serum and plasma specimens may be stored at 2-8°C for up to 3 days. For long-term storage, specimens should be kept below -20°C. Whole blood collected by venipuncture should be stored at 2-8°C if the test is to be run within 2 days of collection. Do not freeze whole blood specimens.

- Bring specimens to room temperature prior to testing. Frozen specimens must be completely thawed and mixed well prior to testing. Specimens should not be frozen and thawed repeatedly.
- If specimens are to be shipped, they should be packed in compliance with local regulations covering the transportation of etiologic agents.

DIRECTIONS FOR USE

Bring tests, specimens, buffer, and/or controls to room temperature (15-30°C) before use.

- Remove the test from its sealed pouch, and place it on a clean, level surface. Label the device with patient or control identification. For best results, the assay should be performed within one hour.
- Add **2 drops of specimen** above to the specimen well and then add **1 drop of buffer**, start the timer.
- Wait for the colored bands to appear. The result should be **read at 10 minutes**. Do not interpret the result after 20 minutes.



INTERPRETATION OF RESULTS

POSITIVE RESULT:

Possible Interpretation of Procalcitonin Levels



A Control band (C) and a test band (T3) appears indicates a PCT level 0.5 mg/L at least.



A Control band (C) and two test bands (T3 and T2) appear indicates a PCT level 2.0 mg/L at least.



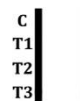
A Control band (C) and three test bands (T1, T2 and T3) appears indicates a PCT level 10.0 mg/L at least.

NEGATIVE RESULT:



Only a Control band (C) appears and no colored band appears in the test region (T) indicates a PCT level is lower than 0.5 mg/L.

INVALID RESULT:



No Control band appears. Results from any test which has not produced Control band at the specified read time must be discarded. Please review the procedure and repeat with a new test. If the problem persists, discontinue using the kit immediately and contact your local distributor.

NOTE:

1. The intensity of the color in the test region (T) may vary depending on the concentration of analytes present in the specimen. Therefore, any shade of color in the test region should be considered positive. Please note that this is a semi-quantitative test only, and cannot determine the concentration of analytes in the specimen.
2. Insufficient specimen volume, incorrect operating procedure or expired tests are the most likely reasons for control band failure.

QUALITY CONTROL

- Internal procedural controls are included in the test. Control band appearing in the control regions is considered an internal positive procedural control, confirming sufficient specimen volume and correct procedural technique.
- External controls are not supplied with this kit. It is recommended that positive and negative controls be tested as a good laboratory practice to confirm the test procedure and to verify proper test performance.

LIMITATIONS

1. The Procalcitonin Semi-Quantitative Rapid Test Cassette (Whole Blood/Serum/Plasma) is for professional *in vitro* diagnostic use, and should only be used for the semi-quantitative detection of Patent Cooperation Treaty.
2. The Procalcitonin Semi-Quantitative Rapid Test Cassette (Whole Blood/Serum/Plasma) will only indicate the semi-quantitative level of PCT in the specimen and should not be used as the sole criteria for evaluating inflammatory conditions.
3. Like with all diagnostic tests, a confirmed diagnosis should only be made by a physician after all clinical and laboratory findings have been evaluated.
4. PCT values near the cut-off level Test line 3 (T3: 0.5 ng/ml), Test line 2 (T2: 2.0 ng/ml), and Test line 1 (T1: 10.0 ng/ml) should be reported with caution as with all quantitative assays there exists some level of variation. Therefore, a T line with slightly higher intensity than T1 can also represent a value slightly below 10.0 ng/ml. Similar observations may occur with values near 2.0 ng/ml and 0.5 ng/ml. A repeat test or further quantitative test is recommended in such cases.

EXPECTED VALUES

The Procalcitonin Semi-Quantitative Rapid Test Cassette (Whole Blood/Serum/Plasma) has been compared with a leading commercial Procalcitonin EIA test, demonstrating an overall accuracy of 98.9%.

PERFORMANCE CHARACTERISTICS**Sensitivity and Specificity**

The Procalcitonin Semi-Quantitative Rapid Test Cassette (Whole Blood/Serum/Plasma) has been evaluated with a leading commercial Procalcitonin EIA test using clinical specimens. The results show that the sensitivity of the Procalcitonin Semi-Quantitative Rapid Test Cassette (Whole Blood/Serum/Plasma) is 98.8% and the specificity is 99.0% relative to the leading EIA test.

Procalcitonin Semi-Quantitative Rapid Test Cassette vs. EIA

Method		EIA Test		Total Results
Semi-Quantitative Rapid Test Cassette	Results	Positive	Negative	
	Positive	84	2	86
	Negative	1	193	194
Total Results		85	195	280

Relative Sensitivity: 98.8%(93.6%-99.9%)*

Relative Specificity: 99.0%(96.3%-99.9%)*

Accuracy: 98.9%(96.9%-99.8%)*

*95% Confidence Interval

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INDEX OF SYMBOLS

	Consult instructions for use		Tests per kit		Authorized Representative
	For <i>in vitro</i> diagnostic use only		Use by		Do not reuse
	Store between 2~30°C		Lot Number		Catalog#



Zhejiang Orient Gene Biotech Co.,Ltd
Address: 3787#, East Yangguang Avenue, Dipu Street,
Anji 313300, Huzhou, Zhejiang, China
Tel: +86-572-5226111 Fax: +86-572-5226222
Website: www.orientgene.com



Shanghai International Holding Corp. GmbH (Europe)
Add: Eiffestrasse 80, 20537 Hamburg, Germany



GDPCT-T402a

TO WHOM IT MAY CONCERN

To any governmental departments,
registration and/or trade offices in MOLDOVA

Distribution Authorisation Letter

This letter confirms that **Sanmedico**
Mun. Chisinau
Str. Petricani 88/1 of. 10
Republica MOLDOVA

is the **legal, exclusive and sole** representative of **TECO Medical Instruments Production + Trading GmbH, Dieselstr. 1, 84088 Neufahrn NB, Germany**, for the territory of **MOLDOVA** only for all TECO products listed below. **Sanmedico** may participate in public and private tenders, providing sales to all TECO customers in the territory. We as manufacturer certify that our warranty is duly passed to the purchaser through **Sanmedico** for the price, delivery schedules and the specifications of the published literature, catalogues and fully covering the commodities offered.

Sanmedico will provide the following information to TECO GmbH when so required in relation to its market surveillance activities:

Reporting of incidents to TECO must take place within 3 working days
Serial number of the device, exact location of the device and the user.

Validity: January 1st, 2025 to December 31st, 2026

Termination: Confirmation ends automatically on Dec. 31st of 2026
and must be then renewed.

Products:

- | | |
|--|---|
| • Coatron M1 | Semi-automated 1-channel Coagulometer (out of production) |
| • Coatron M2 | Semi-automated 2-channel Coagulometer (out of production) |
| • Coatron X Eco | Semi-automated 1-channel Coagulometer |
| • Coatron X Pro | Semi-automated 2-channel Coagulometer |
| • Coatron X Top | Semi-automated 4-channel Coagulometer |
| • Coatron A4 | Fully automated Coagulometer, 4 optic channels |
| • Coatron A6 | Fully automated Coagulometer, 6 optic channels |
| • Coatron A6 plus | Fully automated Coagulometer, 6 optic channels |
| all instruments with complete accessory, consumables and spare parts | |
| • Hemostasis Reagents | Complete product line |

This document is signed in Neufahrn, Germany, on December 3th, 2024

TECO Medical Instruments Production+Trading GmbH


Christian Hoetzl
General Management



Certificate of Approval

This is to certify that the Management System of:

TECO Medical Instruments, Production + Trading GmbH

Dieselstr. 1, 84088 Neufahrn, Germany

has been approved by LRQA to the following standards:

ISO 13485:2016

Approval number(s): ISO 13485 – 00038268

The scope of this approval is applicable to:

Design, development, manufacturing, storage and sales of coagulation instruments and in-vitro-diagnostic reagents used in the hemostaseology and coagulation.

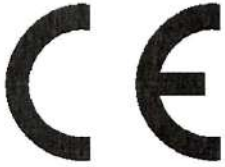


Paul Graaf

Area Operations Manager, Europe

Issued by: LRQA Limited





KONFORMITÄTSERKLÄRUNG DECLARATION OF CONFORMITY

Doc#200/08-2022

Hersteller / Manufacturer:

**TECO Medical Instruments
Production + Trading GmbH**

Adresse / Address:

Dieselstrasse 1, 84088 Neufahrn, Germany

Marktakteur / Actor ID SRN:

DE-MF-000022642 <https://ec.europa.eu>

Wir erklären hier für die im Anhang A (Seite 2 – 23 IVD Produkte) spezifizierten Produkte dass sie gemäß der Richtlinie für In-vitro-Diagnostika Medizinprodukte 98/79/EC klassifiziert sind als allgemeine IVD.

Diese Konformitätserklärung wird unter der alleinigen Verantwortung des Herstellers i.V.m. Artikel 110 Abs.3 und Abs.4 der Verordnung (EU) 2017/746 und des § 8 Abs.1 des Medizinprodukte-Durchführungsgesetzes, in der jeweils geltenden Fassung, ausgestellt.

Im Falle eigenmächtiger Veränderungen am Produkt oder der nicht bestimmungsgemäßen Verwendung verliert diese Erklärung ihre Gültigkeit.

We declare herewith for the products specified in Annex A (page 2 - 23 IVD products) that they are classified as general IVD according to the In Vitro Diagnostic Medical Devices Directive 98/79/EC.

This declaration of conformity is issued under the sole responsibility of the manufacturer in according to article 110 para.3 and para.4 of Regulation (EU) 217/746 and section 8 para.1 of the Medical Device Law Implementing Act.

In case of unauthorised modifications to the products or un-intended use, this declaration loses its validity.

Sie entsprechen den anwendbaren Anforderungen der Richtlinie:

They meet applicable requirements of:

Richtlinie 98/79/EG über In-vitro-Diagnostika
klassifiziert gemäß Artikel 9 als "alle anderen Produkte"

Directive 98/79/EC on in-vitro-diagnostic medical devices
classified according to article 9 as „all other products“

Die Qualitätssicherung entspricht den Anforderungen der
Richtlinie 98/79/EG über In-vitro-Diagnostika
für diese Art von Produkten.

The Quality Assurance is in accordance with the requirements
of Directive 98/79/EC on in-vitro-diagnostic medical devices
for those kind of products.

Der implementierte QM-Prozess entspricht der EN ISO 13485:2021

The implemented QM Process complies with EN ISO 13485:2021

Die vorstehende Konformitätserklärung ist gültig für alle Chargen
dieser Produkte, die nach dem Datum der Unterzeichnung in Verkehr
gebracht wurden.

The above mentioned declaration of conformity is valid for all lots
of this product, which are distributed after the date of signature.

Das Konformitätsbewertungsverfahren entspricht Anhang III
der Richtlinie 98/79/EG über In-vitro-Diagnostika
für diese Art von Produkten.

The conformity assessment procedure complies with Annex III
of Directive 98/79/EC on in-vitro-diagnostic medical devices
for those kind of products.

Ort und Datum der Unterzeichnung:
Place and date of issue:

Neufahrn, 2022-08-31


Christian Hötzel
Verantwortliche Person / PRRC

Doc#200/08-2022

KONFORMITÄTSERKLÄRUNG – DECLARATION OF CONFORMITY

Directive 98/79/EC Annex A

Übrige Produkte – Reagenzien für In-vitro-Diagnostika

Other products – Reagents for in vitro diagnostic – general IVD

Pos.	Article No	Tradename	Unit	Generic Device Term	EMDN / GMDN Code EUDAMED DI
1	A0230-040	TEClot PT-S (Quick)	10x4ml PT-S	Prothrombin time (quick test)	W0103020101 / 30539 B-PTS-A0230-040X7
2	A0230-100	TEClot PT-S (Quick)	10x10ml PT-S	Prothrombin time (quick test)	W0103020101 / 30539 B-PTS-A0230-100WY
3	A0260-050	TEClot PT-B (Owren)	5x10ml PT-B	Prothrombin time (quick test)	W0103020199 / 55986 B-PTB-A0260-050G2
4	A0320-050	TEClot APTT-S	10x5ml APTT-S	Activated partial thromboplastin time	W0103020102 / 55982 B-APTS-A0320-050AM
5	A0401-020	TEClot TT	10x2ml TT	Thrombin time / reptilase / batroxbin time	W0103020103 / 55988 B-TT-A0401-0207P
6	A0511-020	TEClot FIB	10x2ml FIB	Fibrinogen assays (factor i)	W0103020201 / 55997 B-FIB-A0511-020N2
7	A0511-050	TEClot FIB	10x5ml FIB	Fibrinogen assays (factor i)	W0103020201 / 55997 B-FIB-A0511-050NB
8	C1010-020	TEChrom AT	6x6ml reagent FXa 3x3 ml substrate	Antithrombin	W0103020602 / 56156 B-AT-C1010-020HL
9	D2010-012	Red D-Dimer	3x4ml latex 3x7ml reaction buffer	D-Dimer	W0103020503 / 47349 B-DD-D2010-0126W
10	D2020-005	Blue D-Dimer LC	1x5ml latex LC 1x7ml reaction buffer	D-Dimer	W0103020503 / 47349 B-DD-D2020-0057E
11	P8001-010	TECal N	10x1ml	Calibration plasma for haemostasis	W0103020701 / 45786 B-CAL-P8001-005X8
12	P8200-005	TECal DD	5x1ml	Calibration plasma for haemostasis	W0103020701 / 47348 B-CAL-P8200-005XX
13	P6001-010	TEControl N	10x1ml	Control plasma for haemostasis	W0103020702 / 30590 B-CTRL-P6001-010H7
14	P6101-010	TEControl A	10x1ml	Control plasma for haemostasis	W0103020702 / 30590 B-CTRL-P6101-010HQ
15	P6201-010	TEControl A Plus	10x1ml	Control plasma for haemostasis	W0103020702 / 30590 B-CTRL-P6201-010J9
16	P5001-010	TEClot Factor II	10x1ml	Coagulation factor ii (prothrombin)	W0103020202 / 30542 B-FAC-II-P5001-010ML
17	P5101-010	TEClot Factor V	10x1ml	Coagulation factor v	W0103020204 / 30544 B-FAC-V-P5101-010AN
18	P5201-010	TEClot Factor VII	10x1ml	Coagulation factor vii	W0103020205 / 30545 B-FAC-VII-P5201-0107B
19	P5301-010	TEClot Factor VIII	10x1ml	Coagulation factor viii	W0103020207 / 30547 B-FAC-VIII-P5301-01097
20	P5401-010	TEClot Factor IX	10x1ml	Coagulation factor ix	W0103020208 / 30548 B-FAC-IX-P5401-0106C
21	P5501-010	TEClot Factor X	10x1ml	Coagulation factor x	W0103020209 / 30549 B-FAC-X-P5501-010EQ
22	P5601-010	TEClot Factor XI	10x1ml	Coagulation factor xi	W0103020210 / 30551 B-FAC-XI-P5601-010A8
23	P5701-010	TEClot Factor XII	10x1ml	Coagulation factor xii	W0103020211 / 30552 B-FAC-XII-P5701-010CJ

(Recital 23 of Directive 98/79/EC on In Vitro Diagnostics Medical Devices) - Annex A - general IVD



Quality Management

We are certified

Voluntary participation in regular monitoring according to ISO 9001:2008



TECO

MEDICAL INSTRUMENTS
PRODUCTION+TRADING GMBH

Dieselstraße 1

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CERTIFICATE

for: **Mr. Vitalie Goreacii**

Company: **Sanmedico SRL**
Str. Petricani 88/1, oficiul 10
Chisinau - Rep. Moldova MD-2059
MOLDOVA

have participated with success at the intensive training session:

Application and technical training for following instruments:

- **Coatron X series**
 - **Installation**
 - **Application**
 - **General use, also in combination with TECAM Software**
 - **Technical and After Sales Service**

Supervisors: **Mr. Chr. Hoetzi and Mrs. Wendy Guo**

Place of Training: **TECO – Germany**

Date: **November 18th, 2019**


Christian Hoetzi
General Manager



IVD

REF

A0230-010, A0230-040, A0230-100,

Intended Use

This product is used for the determination of prothrombin time (PT) in plasma according to Quick^{1,2}. The test is sensitive to the extrinsic pathway coagulation factors II, V, VII, X and fibrinogen and therefore used for oral anticoagulant therapy with Vitamin-K inhibitors like Warfarin or Marcumar and also for the quantitative determination of extrinsic coagulation factors. The PT measures the extrinsic clotting time (factor VII activation) of test plasma after the addition PT reagent.

Contents & Determinations

Product	TECLOT PT-S	TECLOT PT-S	TECLOT PT-S
Cat.No.	A0230-010	A0230-040	A0230-100
PT-S Reagent*	5x2 mL	10x4 mL	10x10 mL

Determinations

Coatlon M**	200 Det.	800 Det.	2000 Det.
Coatlon A4	100 Det.	400 Det.	1000 Det.
Coatlon A6	200 Det.	800 Det.	2000 Det.

*contains an extract of Rabbit brain with buffer, stabilizers and Calcium chloride.

**Micro method (75µL in total)

Preparation

Reconstitute with high purity water with the volume stated on the vial label.

A0230-010	A0230-040	A0230-100
2 mL	4 mL	10 mL

Let stand at room temperature with occasional swirling for at least 15 min. Then place reagent into instrument and let incubate for further 15 min. The reagent sediments and must be swirled before each testing. On Coatlon instruments, you can use a mixing bar for this.

Storage & Stability

Unopened reagents are stable until the expiration date shown on the label stored at 2°-8°C. Opened reagent:

	2-8 °C	20-25 °C	37°C
PT Reagent	5 days	36 hours	8 hours

Precautions

Avoid contact with skin and eyes. Wear suitable protective clothing. Dispose components in compliance with local regulations for infectious material. All components are checked for HIV, HBV, HCV. However products from human blood should be considered as potentially infectious.

Specimen collection and storage⁴

- Obtain venous blood by clean vein puncture.
- Immediately mix 9 parts blood with 1 part 3.2% sodium citrate (0.105M) and mix well
- Centrifuge the specimen at 1500g for 10 min. (platelet < 10000/µL)
- Separate plasma after centrifugation and store in plastic or siliconised glass tube.
- Use plasma within 4 hours, otherwise store frozen and thaw just prior to use.

Stability of plasma: 4h at 18-26°C 8h at 2-8° 30d at -20°C 6m at -70°C

Procedure**A. Automated Method: Coatlon A**

Prothrombin Time		A4		A6	
PAT	Patient	50µl	CP1	25µl	CP1
BUF	IBS Buffer	0µl	P39	0µl	P79
CLR	-	0µl	-	0µl	-
DP	-	0µl	P00	0µl	P00
R0	-	0µl	P00	0µl	P00
R1	-	0µl	P00	0µl	P00
R2	PT Reagent	100µl	P25	50µl	P46

B. Manual Method: Coatlon M system

- Incubate PT reagent at 37°C for at least 10 minutes
- Pipette **25 µl of sample** into a test cuvette. Incubate at 37°C for 1-2 minutes.
- Add **50 µl of PT reagent** (37°C) and simultaneously start test.
- Record the clotting time in seconds.

For other instrument, please refer to your instrument manual for more detailed instrument specific instructions.

Expected Results

Typical seconds: 11 – 18 sec
Normal range: 70 - 130% 0.85 – 1.15 INR

However results are influenced by instruments, technique, calibration etc. Each laboratory is recommended to establish its own range on the specific instrument used.

Standardisation and Calibration

The PT result is expressed as seconds or activity (% Quick) or INR (International Normalised Ratio).

INR results:

were calculated from normal time and ISI value (international sensitivity index). First is obtained by running fresh plasma from a pool of healthy individuals. The ISI value is stated in the LOT specific certificate of analysis.

$$INR = \left(\frac{Patient\ PT}{Normal\ PT} \right)^{ISI}$$

Activity % (Quick) result:

were calculated from a calibration curve, which is prepared from reference plasma (e.g. TECAL N) and dilutions in saline solution like 0.9% NaCl₂ or TECLOT IBS buffer. At least three or more calibration points are recommended. The calibration curve must be confirmed with control plasma in normal and abnormal range.

% of normal	100%*	50%	25%	12.5%**
diluted in saline	not dil.	1+1	1+3	1+7

*The median of at least 21 healthy individuals is defined as 100%.⁵

**12.5% dilution may cause "+++" results in some cases, because the level of fibrinogen is too high diluted for optical detection.

Quality Control

TEControl or other commercial control plasma should be used for reliable quality control of performance at a frequency in accordance with good laboratory practice (GLP). TEControl can be frozen one time after reconstitution. 120-150 µl stored in closed polypropylen tubes at -20°C is stable for 30 days

Limitations

Great care must be taken to minimize variations which may occur by seemingly insignificant factors.

A. Specimen Collection. AVOID:

- Use only plastic tubes or siliconised glass.
- Delayed mixing of blood with anticoagulant.
- Contamination with tissue thromboplastin.
- Improper ratio of anticoagulant with blood.
- Hemolyzed, icteric or lipemic samples may interfere optical systems

B. Laboratory Techniques

- Perform tests at 37°C.
- Use only high purity water.
- Optimum pH is 7.0-7.5.
- ISI value is not constant within the first 30 min after reconstitution.
- Reagent sediments and must be swirled before each testing.

Performance Characteristics**Typical performance on instrument Coatlon M4**

Precision: CV% (within run) CV% (inter-runs)
Normal control < 3,0 < 5,0
Abnormal control < 3,0 < 5,0

Warranty

This product is warranted to perform in accordance with its labelling and literature. TECO disclaims any implied warranty of merchantability or fitness for any other purpose, and in no event will TECO be liable for any consequential damages arising out of aforesaid express warranty.

References

- Quick, A.J., The Hemorrhagic Diseases and the Physiology of Hemostasis. Charles C. Thomas: Springfield, IL. 1942.
- Quick, A.J., Hemorrhagic Diseases. Lea and Febiger: Philadelphia. 1957.
- Miale, J.B., Laboratory Medicine-Hematology, 4th Edition. C.V. Mosby: St. Louis. 1972.
- National Committee for Clinical Laboratory Standards: Guidelines for the Standardized Collection, Transport and Preparation of Blood Specimens for Coagulation Testing and Performance of Coagulation Assays.
- Besselaar A M H P van den, Lewis SM, Mannucci P n Poller L. 1993. Status of present and candidate International Reference Preparations (IRP) of thromboplastin for prothrombin time. Thromb Hemostas 69: 85
- Besselaar A M H P van den. 1991. The significance of the International Normalized Ratio (INR) for oral anticoagulant therapy. H17CC 3; 146153.

Symbol keys

	Expiry date		In Vitro Diagnostica		Biological hazard		Catalogue Number		Reconstitute with dest. water		Consult accompanying documents
	Store at 2-8°C		EU conformity		Manufacturer		Lot. Number		Ready to use		Authorized Representative





IVD

REF

A0300-025, A0300-050, A0320-050, A0320-100

Intended Use

This product is intended for determination of Activated Partial Thromboplastin Time (APTT) using silicate as activator. The determination of the APTT is used for the global evaluation of the intrinsic pathway and detecting deficiencies of the intrinsic coagulation factors VIII, IX, XI, XII, and Fletcher Factor as well as for monitoring heparin anticoagulant therapy or other coagulation methods where an APTT reagent is required^{1,2}. The APTT reagent in the kit contains phospholipids and silica to ensure a highly consistent and stable product³. The APTT reagent is lupus anticoagulant insensitive. Lupus anticoagulant insensitive reagents yield more reliable factor assay results than reagents, which are sensitive to lupus inhibitors⁴. Prolonged clotting times may be observed in the following situations: deficiency of intrinsic coagulation factors, presence of heparin, in liver diseases, vitamin K Deficiency or other anticoagulants, which affect the intrinsic pathway.

Contents & Determinations

Product	TECLOT APTT-S Kit-25	TECLOT APTT-S Kit-50	TECLOT APTT-S A0300-050	TECLOT APTT-S A0320-100
Cat.No.	A0300-025	A0300-050	A0320-050	A0320-100
APTT-S Reagent*	5x5 mL	5x10 mL	10x5 mL	10x10 mL
CaCl ₂ 0.025M**	5x5 mL	5x10 mL	-	-

Determinations

Coatlon M***	1000 Det.	2000 Det.	2000 Det.	4000 Det.
Coatlon A4	500 Det.	1000 Det.	1000 Det.	2000 Det.
Coatlon A6	1000 Det.	2000 Det.	2000 Det.	4000 Det.

*APTT-S Reagent contains colloidal silicate with phospholipids, buffer and preservatives.

**CaCl₂ contains sodium azide.

***Micro method (75µL in total)

Preparation

Components of kit are ready to use. Allow CaCl₂ to prewarm 15 min at 37 °C and mix APTT reagent gently prior usage

Storage & Stability

Unopened reagents are stable until the expiration date shown on the label stored at 2°-8°C. Opened reagent:

	2-8 °C	20-25 °C	37 °C
APTT-S Reagent	30 days	8 days	8 hours

Precautions

Avoid contact with skin and eyes. Wear suitable protective clothing. Dispose components in compliance with local regulations for infectious material. All components are checked for HIV, HBV, HCV. However products from human blood should be considered as potentially infectious.

Specimen collection and storage⁵

1. Obtain venous blood by clean vein puncture.
2. Immediately mix 9 parts blood with 1 part 3.2% sodium citrate (0.105M) and mix well
3. Centrifuge the specimen at 1500g for 10 min. (platelet < 10000/µL)
4. Separate plasma after centrifugation and store in plastic or siliconised glass tube.
5. Use plasma within 4 hours, otherwise store frozen and thaw just prior to use.

Stability of plasma: 4h at 18-26°C 8h at 2-8° 14d at -20°C 6m at -70°C

Procedure**A. Automated Method: Coatlon A**

APTT-S	A4	A6		A4	A6		A4	A6
PAT Patient	50µl	CP1	25µl	CP1		Incubation	180s	
BUF -	0µl	P00	0µl	P00		Maxtime	180s	
CLR -	0µl	-	0µl	-		Unit	17	
DP -	0µl	P00	0µl	P00		Method	Coag	
R0 -	0µl	P00	0µl	P00		Math	-	
R1 APTT-S	50µl	P31	25µl	P60		CT-Mech	No	
R2 CaCl ₂ 25mM	50µl	P26	25µl	P47		Deadtime	17s	
						SENS	1	
						POINTS	0	
						MIX	No	
						Clean	0	0
						Multi	1	3
						S-Corr	0%	
						T-Corr	15% - 6s	

B. Manual Method: Coatlon M

1. Prewarm CaCl₂ (0.025M) at 37°C for at least 10 min
2. Pipette 25 µl of sample into a test cuvette. Prewarm at 37°C for 1-2 minutes.
3. Add 25 µl APTT-S reagent and incubate exactly for 3 min at 37°C.
4. Add 25 µl of CaCl₂ (0.025M) and simultaneously start test.
5. Record the clotting time in seconds.

Expected Results

Typical normal results are 27-42 sec. However results are influenced by the method of clot detection and can vary from laboratory to laboratory. Each laboratory is recommended to establish its own normal range on the specific instrument used.

Quality Control

TEControl or other commercial control plasma should be used for reliable quality control of performance at a frequency in accordance with good laboratory practice (GLP). TEControl can be frozen one time after reconstitution. 120-150 µl stored in closed polypropylen tubes at -20°C is stable for 30 days

Limitations**A. Specimen Collection. AVOID:**

1. Use only plastic tubes or siliconised glass.
2. Delayed mixing of blood with anticoagulant.
3. Contamination with tissue thromboplastin.
4. Improper ratio of anticoagulant with blood.
5. Hemolyzed, icteric or lipemic samples may interfere optical systems

B. Laboratory Techniques

1. Perform tests at 37°C.
2. Use only high purity water.
3. Optimum pH is 7.0-7.5.

Performance Characteristics**Typical performance on instrument Coatlon M4**

Precision: CV% (within run) CV% (inter-runs)

QC control <3,0 <5,0

Factor & Heparin sensitivity:

Factor (%)	APTT Clotting time (s)		
	FVIII	FIX	FXI
<1%	100	80	103
10%	53	52	58
40%	40	39	41
100%	35	35	358

Heparin (U/mL)	0 U/mL	0,2 U/mL	0,4 U/mL
APTT clotting time (s)	35	70	180

These values should be used as guidelines only. Each laboratory should establish factor or heparin sensitivity using its own instruments and techniques.

Warranty

This product is warranted to perform in accordance with its labelling and literature. TECO disclaims any implied warranty of merchantability or fitness for any other purpose, and in no event will TECO be liable for any consequential damages arising out of aforesaid express warranty.

References

1. Proctor RR, Rapaport SI. The partial thromboplastin time with kaolin. A simple screening test for first stage plasma clotting factor deficiencies. *Am J Clin Pathol* 36, 212-219 (1961).
2. Triplett DA, Harms CS, Koepke JA. The effect of heparin on the activated partial thromboplastin time. *Am J Clin Pathol* 70, 556-569 (1978).
3. Stevenson KJ, Easton AC, Thomson JM, Poller L. The reliability of activated partial thromboplastin time methods and the relationship to lipid composition and ultrastructure. *Thromb Haemost* 55, 250-258 (1986).
4. Denis-Magdelaine A, Flahault A, Verdy E. Sensitivity of sixteen APTT reagents for the presence of lupus anticoagulants. *Haemostasis* 25, 98-105 (1995).
5. NCCLS: Guidelines for the Standardized Collection, Transport and Preparation of Blood Specimens for Coagulation Testing and Performance of Coagulation Assays

Symbols key:

	Expiry date		In Vitro Diagnostica		Biological hazard		Catalogue Number		Consult accompanying documents
	Store at 2-8°C		EU conformity		Manufacturer		Lot. Number		Authorized Representative



Calcium Chloride 0,025M

TECO

**IVD****REF****A0350-050, A0350-100**

Intended Use

This product is used in combination with reagent TEClot APTT-S (Cat.No. A0320) to determine the APTT or also for other 25mM CaCl₂ requiring coagulation tests.

Contents & Determinations

Product	Calcium Chloride	Calcium Chloride
Cat.No.	A0350-050	A0350-100
CaCl ₂ 0.025M	10x5 mL	10x10 mL

Determinations

Coatron M	2000 Det.	4000 Det.
Coatron A	1000 Det.	2000 Det.

Preparation

Ready to use.

Storage and Stability

Unopened reagents are stable until the expiration date shown on the label stored at 2-8°C.

Opened reagent is stable for 30 days at 2-8°C in the original vial.

Precautions

Avoid contact with skin and eyes. Wear suitable protective clothing. Dispose components in compliance with local regulations for infectious material.

Calcium Chloride Solution contains sodium azide. Sodium azide under acid conditions yields Hydrazoic acid, an extremely toxic compound. Azide compounds should be diluted with running water before being discarded. Upon disposal, azide compounds should be flushed with large volumes of water. These precautions are recommended to avoid deposits in metal pipes in which explosive conditions may develop.

Warranty

This product is warranted to perform in accordance with its labelling and literature. TECO disclaims any implied warranty of merchantability or fitness for any other purpose, and in no event will TECO be liable for any consequential damages arising out of aforesaid express warranty.

Symbols key:

Expiry date	IVD In Vitro Diagnostica	Biological hazard	REF Catalogue Number	Consult accompanying documents
Store at 2-8°C	CE EU conformity	Manufacturer	LOT Lot. Number	EC REF Authorized Representative



Calcium Chloride 0,025M

TECO

**IVD****REF****A0350-050, A0350-100**

Verwendungszweck

Wird zusammen mit dem Reagenz TEClot APTT-S (Kat. Nr. A0320) zur Bestimmung von der APTT verwendet oder auch für andere Gerinnungstests, für die 25mM CaCl₂ benötigt wird.

Inhalt und Bestimmungen

Produkt	Kalzium Chlorid	Kalzium Chlorid
Kat. Nr.	A0350-050	A0350-100
CaCl ₂ 0.025M	10x5 mL	10x10 mL

Bestimmungen

Coatron M	2000 Det.	4000 Det.
Coatron A	1000 Det.	2000 Det.

Vorbereitung

Das Reagenz ist gebrauchsfertig

Lagerung und Stabilität

Ungeöffnete Reagenzien sind bei einer Lagerung zwischen 2-8°C bis zum auf dem Etikett angegebenen Verfallsdatum haltbar.

Geöffnete Reagenzien sind bei Lagerung zwischen 2-8°C im Originalfläschchen 30 Tage haltbar.

Vorsichtsmaßnahmen

Haut- und Augenkontakt vermeiden. Schutzkleidung tragen. Abfälle unter Beachtung der vorgeschriebenen internationalen, nationalen und lokalen Bestimmungen entsorgen.

Die Calcium Chlorid Lösung enthält Natriumazid. Unter sauren Bedingungen setzt Natriumazid Hydrogenazid frei, ein höchst giftiger Wirkstoff. Azidverbindungen sollten unter laufendem Wasser gelöst werden bevor sie entsorgt werden. Diese Vorsichtsmaßnahmen werden empfohlen, um Ablagerungen in Metallrohren zu verhindern, die explosive Bedingungen entwickeln könnten.

Garantie

Es wird garantiert, dass die Wirkungsweise dieses Produktes den Angaben auf der Packung und in der Produktliteratur entspricht. TECO haftet weder für die Veräußlichkeit oder Eignung dieses Produktes für irgendwelche andere Zwecke noch für irgendwelche Folgeschäden, die sich aus der vorstehenden, expliziten Garantie ergeben.

Erklärung der Symbole:

Verfallsdatum	IVD In-Vitro Diagnostik	Biologische Gefahr	REF Katalog-Nummer	Begleitpapiere beachten
Bei 2-8°C lagern	CE EU Konformität	Hersteller	LOT Lot. - Nummer	EC REP Bevollmächtigter





IVD

REF

A0501-010, A0501-025, A0511-020, A0511-050

Intended Use

The TEClot FIB is intended for the quantitative determination of fibrinogen in human plasma according to method developed by Clauss.¹ Levels of fibrinogen can increase as a result of inflammation, pregnancy or oral contraceptive use². Decreased levels can be found in certain states such as liver disease and DIC. Congenital deficiencies include afibrinogenemia (no detectable fibrinogen), hypofibrinogenemia (<1 mg/ml) and dysfibrinogenemia (abnormal fibrinogen molecule).

Contents & Preparation

Product	TEClot FIB Kit-10	TEClot FIB Kit-25	TEClot FIB	TEClot FIB
Cat.No.	A0501-010	A0501-025	A0511-020	A0511-050
Thrombin Reagent	5x2 mL	5x5 mL	10x2 mL	10x5 mL
IBS Buffer	1x125 mL	1x125 mL	-	-
TECal Normal	1x1 mL	1x1 mL	-	-
TEControl A	1x1 mL	1x1 mL	-	-

Determinations

Coatlon M*	400 Det.	1000 Det.	800 Det.	2000 Det.
Coatlon A4	200 Det.	500 Det.	400 Det.	1000 Det.
Coatlon A6	200 Det.	500 Det.	400 Det.	1000 Det.

*Micro method (75µl in total)

- Thrombin Reagent:
Contains bovine thrombin (~80NIH) with stabilizers
REF: A0501-010/A0511-020: Reconstitute with 2mL purified water
REF: A0501-025/A0511-050: Reconstitute with 5mL purified water
- IBS Buffer: Ready to use. Contains Imidazole buffered saline
- TECal Normal: Reconstitute with 1 mL purified water.
Contains citrated human plasma.
- TEControl A: Reconstitute with 1 mL purified water.
Contains citrated human plasma.



Swirl gently after reconstitution and allow standing for 15 minutes at room temperature. Mix well before use. Do not shake.

Storage & Stability

Unopened reagents are stable until the expiration date shown on the label stored at 2°-8°C. Opened reagent:

Thrombin Reagent*	2-8 °C	15-25 °C	37 °C
	12 days	5 days	24 hours
TEControl or Plasma	2-8 °C	15-25 °C	-20 °C
	8 hours	4 hours	30 days

* Reagent must be protected from UV-light and evaporation

Precautions

Avoid contact with skin and eyes. Wear suitable protective clothing. Dispose components in compliance with local regulations for infectious material. All components are checked for HIV, HBV, HCV. However products from human blood should be considered as potentially infectious.

Specimen collection and storage³

- Obtain venous blood by clean vein puncture.
- Immediately mix 9 parts blood with 1 part 3.2% sodium citrate (0.105M) and mix well
- Centrifuge the specimen at 1500g for 10 min. (platelet < 10000/µL)
- Separate plasma after centrifugation and store in plastic or siliconised glass tube.
- Use plasma within 4 hours, otherwise store frozen and thaw just prior to use.

Procedure**A. Automated Method. Coatlon A**

Fibrinogen	A4	A6		A4	A6		A4	A6
PAT Patient	10µl	CP1	10µl	CP1	Incubation	0s	SENS	0
BUF IBS Buffer	90µl	P39	90µl	P79	Maxtime	120s	POINTS	4
CLR -	0µl	-	0µl	-	Unit	769	MIX	No
DP -	0µl	P00	0µl	P00	Method	Coag	Clean	1 3
R0 -	0µl	P00	0µl	P00	Math	log XY	Multi	1 1
R1 -	0µl	P00	0µl	P00	CT-Mech	Yes	S-Corr	0%
R2 Fibrinogen	50µl	P29	50µl	P49	Deadtime	3s	T-Corr	0%

B. Manual Method: Coatlon M**1. Preparation of Standard, Control and Patient Dilutions**

Standard Dilution	Plasma	IBS Buffer
1:5	200µL Standard	800µL
1:10	500µL 1:5 STD	500µL
1:20	500µL 1:10 STD	500µL
1:40	500µL 1:20 STD	500µL
Patient or Control	100µL Plasma	900µL

2. Pipette **50 µl diluted standard or patient plasma** (1:10) into a test cuvette. Prewarm at 37°C for 1-2 minutes.

3. Add **25 µl Thrombin reagent** and simultaneously start test.

For other instrument, please refer to your instrument manual for more detailed instrument specific instructions.

Calibration

TECal Normal or other commercially prepared plasma standard in which Fibrinogen has been determined should be used as reference (200-300mg/dL). Plot the clotting time obtained with each of the FIB standard dilutions on the y-axis against the concentration of FIB (mg/dL) on the x-axis using log-log graph paper. The line of best fit should be determined by linear regression analysis. The fibrinogen in plasma samples can be determined by interpolation from the calibration curve.

Expected Results

Typical normal results are 180-450 mg/dL^{4,5}. However results are influenced by the method of clot detection and can vary from laboratory to laboratory. Each laboratory is recommended to establish its own normal range on the specific instrument used.

Quality Control

TEControl or other commercial control plasma should be used for reliable quality control of performance at a frequency in accordance with good laboratory practice (GLP). TEControl can be frozen one time after reconstitution. 120-150 µl stored in closed polypropylene tubes at -20°C is stable for 30 days

Limitations**A. Specimen Collection. AVOID:**

- Use only plastic tubes or siliconised glass.
- Delayed mixing of blood with anticoagulant.
- Contamination with tissue thromboplastin.
- Improper ratio of anticoagulant with blood.
- Hemolyzed, icteric or lipemic samples may interfere optical systems

B. Laboratory Techniques

- Perform tests at 37°C.
- Use only high purity water.
- Optimum pH is 7.0-7.5.

Performance Characteristics

Precision:	CV% (within run)	CV% (inter-runs)
Normal control	< 5.0	< 5.0
Abnormal control	< 5.0	< 10.0

(Typical performance on instrument Coatlon M4)

Warranty

This product is warranted to perform in accordance with its labelling and literature. TECO disclaims any implied warranty of merchantability or fitness for any other purpose, and in no event will TECO be liable for any consequential damages arising out of aforesaid express warranty.

References

- Clauss, A., Gerinnungsphysiologische Schnellmethode zur bestimmung des Fibrinogens. Acta Haematol., 1957, 17: 237-246.
- Shaw, T.S., Assays for Fibrinogen and its Derivatives, CRC Crit. Rev. Clin. Lab. Sci., 1977, 8: 145-192.
- National Committee for the National Laboratory (NCCLS) Standards: Collection transport and preparation of blood specimens for coagulation testing and performance of coagulation assays. Document H21-A2, vol. 11, No. 23, 1991.
- Scully, R.E. et al., Normal Reference Laboratory Values, N. Eng. J. Med., 1980, 302(37) : 37-48.
- Okuno, T. and Selenko, V., Amer. J. Med. Tech., 1972, 38(6) : 196-201.

Symbols key:

Expiry date	In Vitro Diagnostica	Biological hazard	Catalogue Number	Consult accompanying documents
Store at 2-8°C	EU conformity	Manufacturer	Lot. Number	Authorized Representative





IVD

REF

A0501-010, A0501-025, A0511-020, A0511-050

Verwendungszweck

TECLOT FIB wird zur quantitativen Bestimmung von Fibrinogen im menschlichen Plasma nach einer von Clauss¹ entwickelten Methode verwendet. Der Fibrinogenpegel kann auf Grund von Entzündungen, Schwangerschaft und dem Gebrauch von Ovulationshemmern ansteigen². Geringere Konzentrationen können bei verschiedenen Krankheiten wie Leberversagen und DIC auftreten. Angeborene Defizite beinhalten Afibrinogenämie (kein auffindbares Fibrinogen), Hypofibrinogenämie (<1 mg/ml) und Dysfibrinogenämie (abnormale Fibrinogenmoleküle).

Inhalte und Vorbereitungen

Produkt	TECLOT FIB Kit-10	TECLOT FIB Kit-25	TECLOT FIB A0511-020	TECLOT FIB A0511-050
Kat. Nr.	A0501-010	A0501-025	A0511-020	A0511-050
Thrombin Reagenz	5x2 mL	5x5 mL	10x2 mL	10x5 mL
IBS Puffer	1x125 mL	1x125 mL	-	-
TECal Normal	1x1 mL	1x1 mL	-	-
TEControl A	1x1 mL	1x1 mL	-	-

Bestimmungen

Coatron M*	400 Det.	1000 Det.	800 Det.	2000 Det.
Coatron A4	200 Det.	500 Det.	400 Det.	1000 Det.
Coatron A6	200 Det.	500 Det.	400 Det.	1000 Det.

*Mikromethode (75µL insgesamt)

- Thrombin Reagenz:
Enthält Rinderthrombin (~80 NIH) mit Stabilisatoren.
REF: A0501-010/A0511-020: mit 2ml hochreinem Wasser anlösen
REF: A0501-025/A0511-050: mit 5ml hochreinem Wasser anlösen
- IBS Puffer: gebrauchsfertig, 125ml
Enthält gepufferte Natriumchlorid Lösung, pH 7,3-7,4
- TECal Normal: Mit 1ml hochreinem Wasser anlösen
Enthält mit Zitrat versetztes menschliches Plasma.
- TEControl A: Mit 1ml hochreinem Wasser anlösen
Enthält mit Zitrat versetztes menschliches Plasma. 

Nach der Anlösung vorsichtig leicht schwenken und bei Raumtemperatur 15 Minuten stehen lassen. Vor Gebrauch gut mischen. Nicht schütteln.

Lagerung und Stabilität

Ungeöffnete Reagenzien sind bei Lagerung zwischen 2-8°C bis zum auf dem Etikett angegebenen Verfallsdatum haltbar. **Geöffnete Reagenzien:**

Thrombin Reagenz*	2-8 °C 12 days	15-25 °C 5 days	37 °C 24 Std
TEControl oder Plasma	2-8 °C 8 Std	15-25 °C 4 Std	-20 °C 30 Std

* Reagenz muss vor UV-Licht und Verdunstung geschützt werden.

Vorsichtsmaßnahme

Haut- & Augenkontakt vermeiden. Abfälle gemäß lokaler Richtlinien für infektiöse Materialien entsorgen. Alle Bestandteile wurden auf HIV, HBV und HCV getestet. Trotzdem müssen Produkte aus menschlichem Blut immer als potentiell infektiös behandelt werden.

Probenentnahme und Lagerung³

- Verfüßtes Blut mittels Venenpunktur unter sauberen Bedingungen entnehmen.
- Sofort 9 Teile Blut mit einem Teil 3,2% Natriumzitrat (0,105M) gut mischen.
- Probe bei 1500g 10 Minuten lang zentrifugieren (Thrombozyten <10000/µl)
- Plasma nach der Zentrifugierung entfernen und in einem Röhrchen aus Plastik oder silikonisiertes Glas aufbewahren.
- Plasma innerhalb von 4 Stunden verwenden, andernfalls gefroren lagern und kurz vor Gebrauch auftauen.

Verfahren**A. Automatenmethode: Coatron A**

Fibrinogen	A4	A6		A4	A6		A4	A6
PAT Patient	10µl	CP1	10µl	CP1	Incubation	0s	SENS	0
BUF IBS Buffer	90µl	P39	90µl	P79	Maxtime	120s	POINTS	4
CLR -	0µl	-	0µl	-	Unit	769	MIX	No
DP -	0µl	P00	0µl	P00	Method	Coag	Clean	1 3
R0 -	0µl	P00	0µl	P00	Math	log XY	Multi	1 1
R1 -	0µl	P00	0µl	P00	CT-Mech	Yes	S-Corr	0%
R2 Fibrinogen	50µl	P29	50µl	P49	Deadtime	3s	T-Corr	0%

Erklärung der Symbole:

	Verfallsdatum		In-Vitro Diagnostik		Biologische Gefahr		Katalog-Nummer		Begleitpapiere beachten
	Bei 2-8°C lagern		EU Konformität		Hersteller		Lot. - Nummer		Bevollmächtigter

B. Manuelle Methode: Coatron M

- Vorbereitung von Standard-, Kontroll- und Patientenlösungen

Standardlösung	Plasma	IBS Puffer
1:5	200µL Standard	800µL
1:10	500µL 1:5 STD	500µL
1:20	500µL 1:10 STD	500µL
1:40	500µL 1:20 STD	500µL
Patient oder Kontrolle	100µL Plasma	900µL

- 50µL verdünntes Standard- oder Patientenplasma (1:10) in eine Küvette pipettieren. Bei 37°C für 1-2 Minuten erwärmen
 - 25µL Thrombinreagenz hinzufügen und gleichzeitig Test starten.
- Wenn Sie ein anderes Gerät verwenden, lesen Sie bitte für genauere Informationen die entsprechende Geräteanleitung.

Kalibrierung

TECal Normal oder anderes kommerzielles Standardplasma, mit bekanntem Fibrinogengehalt, sollte als Referenz (200-300 mg/dl) verwendet werden. Geben Sie die Gerinnungszeit jeder FIB Standard Lösung auf der Y- Achse gegen die FIB Konzentration (mg/dl) auf der X- Achse an. Verwenden Sie Millimeterpapier. Die Reihe der besten Ergebnisse sollte durch lineare Regressionsanalyse bestimmt werden. Fibrinogen in den Plasmaproben kann durch Interpolation der Kalibrierungskurve bestimmt werden.

Erwartete Ergebnisse

Typische normale Ergebnisse sind 180-450mg/dl^{4,5}. Die Ergebnisse sind jedoch von der Methode, wie die Gerinnungszeit bestimmt wird, abhängig und können von Labor zu Labor variieren. Jedem Labor wird empfohlen, seinen eigenen normalen Ergebnisbereich auf dem verwendeten Instrument zu erstellen.

Qualitätskontrolle

TEControl oder anderes kommerzielles Kontrollplasma sollte, um eine gute Qualität sicherzustellen, in regelmäßigen Abständen entsprechend Laborrichtlinien gemessen werden. In regelmäßigen Abständen entsprechend Laborrichtlinien gemessen werden. TEControl kann einmalig wieder eingefroren werden. Hierfür 120-150µL in einem verschließbaren polypropylen Gefäß bei -20°C aufbewahren und innerhalb der nächsten 30 Tage verwenden.

Beschränkungen

A. Probenvorbereitung. Achten Sie auf:

- nur Plastikröhrchen oder silikonisiertes Glas verwenden
- verzögertes Mischen von Blut mit Antikoagulanzen vermeiden
- Kontamination mit Gewebethromboplastin vermeiden
- falsches Verhältnis von Antikoagulanzen und Blut vermeiden
- Hämolytische, lipämische oder ikterische Proben können optische Systeme stören

B. Labortechniken

- Tests bei 37°C durchführen
- nur hochreines Wasser verwenden
- der optimale pH Wert ist 7,0-7,5

Leistungsdaten

Präzision:	VK% (Einzellauf)	VK% (Mehrfachlauf)
Normale Kontrolle	< 5,0	< 5,0
Abnormale Kontrolle	< 5,0	< 10,0

(Typische Leistung beim Gerät Coatron M4)

Garantie

Es wird garantiert, dass die Wirkungsweise dieses Produktes den Angaben auf der Packung und in der Produktliteratur entspricht. TECO haftet weder für die Veräußerlichkeit oder Eignung dieses Produktes für irgendwelche andere Zwecke noch für irgendwelche Folgeschäden, die sich aus der vorstehenden, expliziten Garantie ergeben.

Referenzen

- Clauss, A., Gerinnungsphysiologische Schnellmethode zur Bestimmung des Fibrinogens. Acta Haematol., 1957, 17: 237-246.
- Shaw, T.S., Assays for Fibrinogen and its Derivatives, CRC Crit. Rev. Clin. Lab. Sci., 1977, 8: 145-192.
- National Committee for the National Laboratory (NCCLS) Standards: Collection transport and preparation of blood specimens for coagulation testing and performance of coagulation assays. Document H21-A2, vol. 11, No. 23, 1991.
- Scully, R.E. et al., Normal Reference Laboratory Values, N. Eng. J. Med., 1980, 302(37): 37-48.
- Okuno, T. and Selenko, V., Amer. J. Med. Tech., 1972, 38(6): 196-201.





IVD

REF

A0501-010, A0501-025, A0511-020, A0511-050

Revisions-Übersicht:

Rev.	am	Änderung durch	Gültig für	Freigabe am	Freigabe durch
1	5.4.11	WG	Technoclone FIB		
	Beschreibung:	New box insert for Technoclone FIB.			
2	21.12.11	CB	Technoclone FIB	21.12.11	CH
	Beschreibung:	Neue Stabilitätsangaben. Die Vorgaben wurden dem Technoclone Stability Test Report „TC6E0C.01“ vom 5.5.2010 entnommen.			
3	11.11.13	CB	Technoclone FIB		
	Beschreibung:	- Protokoll für A4+A6 - Stabilitätsdaten neu			
4	16.10.17	AR	Technoclone FIB	16.10.17	CH
	Beschreibung:	Technoclone Puffer (A0591-090) wird ersetzt durch IBS (A0590-125) (wegen deutlicher Messunterschiede bei Coatron A und X Serie) Wertermittlung für das CoA erfolgt ebenso mit IBS (A0590-125)			
5	23.01.18	VG	Technoclone FIB	23.01.18	VG
	Beschreibung:	Neue Stabilitätsangaben von Technoclone vom Thrombin Reagent.			





IVD

REF

A0590-125

Intended Use

The IBS Buffer solution is optimally formulated for use on Coagulation Analyzers. Use in accordance with the recommended Operators Manuals for installing and replacing Owrens Veronal Buffer (OVB). The IBS can be used as the diluent for preparing plasma dilutions in the performance of Fibrinogen determinations and Coagulation Factor Assays with all manual, mechanical, or photo-optical means of clot detection. Follow Reagent manufacturer's recommended procedures for preparation of plasma dilutions using Imidazole Buffered Saline.

Contents & Determinations

Product	IBS Buffer
Cat.No.	A0590-125
IBS Buffer	1x125 mL

Preparation

IBS: pH 7.3 - 7.4, liquid
Ready to use.

Storage and Stability

Unopened reagents are stable until the expiration date shown on the label stored at 2-8°C.

Precautions

Avoid contact with skin and eyes. Wear suitable protective clothing. Dispose components in compliance with local regulations for infectious material.

Warranty

This product is warranted to perform in accordance with its labelling and literature. TECO disclaims any implied warranty of merchantability or fitness for any other purpose, and in no event will TECO be liable for any consequential damages arising out of aforesaid express warranty.

Symbols key:

Expiry date	In Vitro Diagnostica	Biological hazard	Catalogue Number	Consult accompanying documents
Store at 2-8°C	EU conformity	Manufacturer	Lot. Number	Authorized Representative





Verwendungszweck

Die IBS Pufferlösung (Imidazole Buffered Saline) wird für die Verdünnung von Plasma verwendet werden, wie es z.B. bei der koagulometrischen Bestimmung von Fibrinogen, Einzelfaktoren oder auch Verdünnungsreihen für die Methoden Kalibrierung notwendig ist.

Inhalte und Bestimmungen

Produkt	IBS Puffer
Kat.Nr.	A0590-125
IBS Buffer	1x125 mL

Vorbereitung

IBS: pH 7.3 - 7.4, flüssig
Gebrauchsfertig

Lagerung und Stabilität

Ungeöffnete Reagenzien sind bei Lagerung zwischen 2-8°C bis zum auf dem Etikett angegebenen Verfallsdatum haltbar.

Vorsichtsmaßnahmen

Haut- und Augenkontakt vermeiden. Angemessene Schutzkleidung tragen. Bestandteile gemäß lokaler Vorschriften für infektiöse Materialien entsorgen.

Garantie

Es wird garantiert, dass die Wirkungsweise dieses Produktes den Angaben auf der Packung und in der Produktliteratur entspricht. TECO haftet weder für die Veräußlichkeit oder Eignung dieses Produktes für irgendwelche andere Zwecke noch für irgendwelche Folgeschäden, die sich aus der vorstehenden, expliziten Garantie ergeben.

Erklärung der Symbole:

Verfallsdatum	In-Vitro Diagnostik	Biologische Gefahr	Katalog-Nummer	Begleitpapiere beachten
Bei 2-8°C lagern	EU Konformität	Hersteller	Lot. – Nummer	Bevollmächtigter





IVD

REF

P8001-005

Intended Use

Use as a calibrator or normal control for following coagulation tests:

**PT, APTT, Thrombin time, Fibrinogen,
Factors: II, V, VII, VIII, IX, X, XI, XII,
Antithrombin, Protein-C, free Protein-S,
D-Dimer**

Contents

5 x 1 mL freeze dried citrate-anticoagulated human plasma

Preparation

Reconstitute individual vials with **1,0 ml** distilled water. Allow to stand at room temperature, with occasional swirling, for 15 min before use. Be certain all particulate matter is well dissolved.

PT whole blood (TECLOT PT-B CAT=A0260 xxx): Reconstitute individual vials with **1,7 ml** distilled water.

Storage & Stability

Unopened vials are stable until the expiration date shown on the label stored at 2°-8°C.

Dissolved plasma change analytic levels below 10% if stored as following:

-20 °C	2-8 °C	20-25 °C	37°C
30 days	24h	8h	2 hours

Dissolved plasma can be refrozen only one time in aliquots (120-150µL). Stored at -20°C in closed polypropylene tubes, the aliquots must be used within 30 days.

Precautions: Potential Biohazardous material

This product contains substance from human origin! Avoid contact with skin and eyes. Wear suitable protective clothing. Dispose components in compliance with local regulations for infectious material. All components are checked for HIV, HBV and HCV. However products from human blood should be considered as potentially infectious.

Performance Characteristics:

Refer to "Certificate of Analysis".

Limitations:

The control plasma is subject to the limitations of the assay system (reagent + instrument). Results out of expected range may indicate deterioration, false test calibration or problems with one or more components of the test system

Warranty

This product is warranted to perform in accordance with its labelling and literature. TECO disclaims any implied warranty of merchantability or fitness for any other purpose, and in no event will TECO be liable for any consequential damages arising out of aforesaid express warranty.

Symbols key:

Expiry date	In Vitro Diagnostic	Biological hazard	Catalogue Number	Consult accompanying documents
Store at 2-8°C	EU conformity	Manufacturer	Lot. Number	Authorized Representative



IVD

REF

P8001-005

Verwendungszweck

Als Kalibrator oder Normalkontrolle für folgende Gerinnungstests verwenden:

**PT, APTT, Thrombinzeit, Fibrinogen,
Faktoren: II, V, VII, VIII, IX, X, XI, XII,
Antithrombin, Protein-C, freies Protein-S,
D-Dimer**

Inhalt

5 x 1mL gefriergetrocknetes mit Zitrat versetztes gerinnungshemmendes Humanplasma

Vorbereitung

Die einzelnen Fläschchen mit 1,0ml destilliertem Wasser anlösen. Fläschchen bei Raumtemperatur bis zur Anwendung unter gelegentlichen Verwirbeln 15 Minuten lang stehen lassen. Stellen Sie sicher, dass alle Partikel gut aufgelöst sind.

Vollblut PT (TEClot PT-B CAT=A0260 xxx): einzelne Fläschchen mit 1,7ml destilliertem Wasser anlösen.

Lagerung und Stabilität

Ungeöffnete Fläschchen sind bei Lagerung zwischen 2-8°C zum bis auf dem Etikett angegebenen Verfallsdatum haltbar.

Gelöstes Plasma verändern die analytischen Levels unter 10% wenn wie folgt gelagert:

-20 °C	2-8 °C	20-25 °C	37°C
30 Tage	24 Stunden	8 Stunden	2 Stunden

Gelöstes Plasma kann einmalig wiedereingefroren werden. Die Aliquots (120-150µL) sind 30 Tage haltbar, wenn sie in polypropylen Gefäßen bei -20°C aufbewahrt werden.

Vorsichtsmaßnahmen: Potentiell infektiöses Material

Dieses Produkt enthält Substanzen humanen Ursprungs! Haut- und Augenkontakt vermeiden. Angemessene Schutzkleidung tragen. Abfälle laut lokaler Regelungen für infektiöse Materialien entsorgen. Alle Bestandteile wurden auf HIV, HBV und HCV getestet. Trotzdem müssen Produkte aus menschlichem Blut immer als potentiell infektiös angesehen werden.

Erwartete Ergebnisse

Lesen Sie das Analysenzertifikat

Einschränkungen:

Das Kontrollplasma unterliegt den Einschränkungen der verwendeten Reagenzien und Geräte. Ergebnisse außerhalb des Sollbereichs können verursacht werden durch abgelaufene Materiale, ungültige Methodenkalibration oder Problemen an Reagenz, Gerät oder Zubehör.

Garantie

Es wird garantiert, dass die Wirkungsweise dieses Produkts den Angaben auf der Packung und in der Produktliteratur entspricht. TECO haftet weder für die Veräußerlichkeit oder Eignung dieses Produktes für irgendwelche andere Zwecke noch für irgendwelche Folgeschäden, die sich aus der vorstehenden, expliziten Garantie ergeben.

Erklärung der Symbole:

	Verfallsdatum		In-Vitro Diagnostik		Biologische Gefahr		Katalog-Nummer		Begleitpapiere beachten
	Bei 2-8°C lagern		EU Konformität		Hersteller		Lot. - Nummer		Bevollmächtigter





IVD

REF

P6001-010

Intended Use

Use as a normal control for following coagulation tests:

**PT, APTT, Thrombin time, Fibrinogen,
Anti-thrombin and D-Dimer**

Contents

10 x 1mL freeze dried citrate-anticoagulated human plasma

Preparation

Reconstitute individual vials with **1,0 ml** distilled water. Allow to stand at room temperature, with occasional swirling, for 15 min before use. Be certain all particulate matter is well dissolved.

PT whole blood (TEClot PT-B): Reconstitute individual vials with **1,7 ml** distilled water.

Storage & Stability

Unopened vials are stable until the expiration date shown on the label stored at 2°-8°C.

Dissolved plasma change analytic levels below 10% if stored as following:

-20 °C	2-8 °C	20-25 °C
1 month	8 hours	4 hours

Dissolved plasma can be refrozen only one time in aliquots (120-150µL). Stored at -20°C in closed polypropylene tubes, the aliquots must be used within 30 days.

Precautions

This product contains substance from human origin!
Avoid contact with skin and eyes. Wear suitable protective clothing. Dispose components in compliance with local regulations for infectious material. All components are checked for HIV, HBV and HCV. However products from human blood should be considered as potentially infectious.

Expected Results

Refer to "Certificate of Analysis".

Warranty

This product is warranted to perform in accordance with its labelling and literature. TECO disclaims any implied warranty of merchantability or fitness for any other purpose, and in no event will TECO be liable for any consequential damages arising out of aforesaid express warranty.

Symbols key:

Expiry date	In Vitro Diagnostica	Biological hazard	Catalogue Number	Consult accompanying documents
Store at 2-8°C	EU conformity	Manufacturer	Lot. Number	Authorized Representative





IVD

REF

P6001-010

Verwendungszweck

Als normale Kontrolle für folgende Gerinnungstests verwenden:

**PT, APTT, Thrombinzeit, Fibrinogen,
Antithrombin und D-Dimer**

Inhalt

10 x 1mL gefriergetrocknetes mit Zitrat versetztes
gerinnungshemmendes Humanplasma

Vorbereitung

Die einzelnen Fläschchen mit 1,0ml destilliertem Wasser anlösen. Fläschchen bei Raumtemperatur bis zur Anwendung unter gelegentlichen Verwirbeln 15 Minuten lang stehen lassen. Stellen Sie sicher, dass alle Partikel gut aufgelöst sind.

Vollblut PT (TECLOT PT-B): einzelne Fläschchen mit 1,7ml destilliertem Wasser anlösen.

Lagerung und Stabilität

Ungeöffnete Fläschchen sind bei Lagerung zwischen 2-8°C zum bis auf dem Etikett angegebenen Verfallsdatum haltbar.

Gelöstes Plasma verändern die analytischen Levels unter 10% wenn wie folgt gelagert:

-20 °C	2-8 °C	20-25 °C
1 Monat	8 Stunden	4 Stunden

Gelöstes Plasma kann einmalig wiedereingefroren werden. Die Aliquots (120-150µL) sind 30 Tage haltbar, wenn sie in polypropylen Gefäßen bei -20°C aufbewahrt werden.

Vorsichtsmaßnahmen

Dieses Produkt enthält Substanzen humanen Ursprungs! Haut- und Augenkontakt vermeiden. Angemessene Schutzkleidung tragen. Abfälle laut lokaler Regelungen für infektiöse Materialien entsorgen. Alle Bestandteile wurden auf HIV, HBV und HCV getestet. Trotzdem müssen Produkte aus menschlichem Blut immer als potentiell infektiös angesehen werden.

Erwartete Ergebnisse

Lesen Sie das Analysenzertifikat

Garantie

Es wird garantiert, dass die Wirkungsweise dieses Produkts den Angaben auf der Packung und in der Produktliteratur entspricht. TECO haftet weder für die Veräußlichkeit oder Eignung dieses Produktes für irgendwelche andere Zwecke noch für irgendwelche Folgeschäden, die sich aus der vorstehenden, expliziten Garantie ergeben.

Erklärung der Symbole:

Verfallsdatum	In-Vitro Diagnostik	Biologische Gefahr	Katalog-Nummer	Begleitpapiere beachten
Bei 2-8°C lagern	EU Konformität	Hersteller	Lot. - Nummer	Bevollmächtigter



IVD

REF

P6101-010

Intended Use

Use as an abnormal control for following coagulation tests:

**PT, APTT, Thrombin time, Fibrinogen,
Antithrombin and D-Dimer**

Contents

10 x 1mL freeze dried citrate-anticoagulated human plasma

Preparation

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Store at 2-8°C	EU conformity	Manufacturer	Lot. Number	Authorized Representative





IVD

REF

P6101-010

Verwendungszweck

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**PT, APTT, Thrombinzeit, Fibrinogen,
Antithrombin und D-Dimer**

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