

March 18th, 2025

Declaration Letter

To Whom It May Concern:

We, ACON Laboratories, Inc., with a registered office at 5850 Oberlin Drive #340, San Diego, CA 92121, authorize SRL Sanmedico, with a registered office at A. Corobceanu Street 7A, Apt. 9, Chişinău, MD-2012, Moldova, to register, notify, renew, or modify the registration of medical devices in the territory of the Republic of Moldova.

Sincerely,

Qiyi Xie

V.P. of Regulatory Affairs & Clinical Affairs ACON Laboratories, Inc.







Product Service

Certificate

No. Q5 104507 0001 Rev. 03

Holder of Certificate: ACON Laboratories, Inc.

5850 Oberlin Drive, #340 San Diego CA 92121 **USA**

Certification Mark:



Design and Development, Manufacture and distribution Scope of Certificate: 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

SH22743A01 Report No.:

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

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

3 7 7

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.







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

SH22743EXT01 Report no.:

Valid from: 2022-05-04 Valid until: 2025-05-26

2022-05-04 Date,

> 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

On Call Plus Blood Glucose Monitoring System, Model(s):

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-

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),

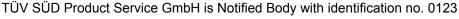
GIMA Blood Glucose Monitoring System,

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-

Go-Keto Blood Ketone Test Strips (OGS-161),

Go-Keto Blood Glucose Test Strips,

On Call Extra GM Blood Glucose Monitoring System(OGM-

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

ACON Laboratories, Inc. Facility(ies):

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

TÜV SÜD Product Service GmbH is Notified Body with identification no. 0123

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.

Mission® Urinalysis Strips and Controls



Mission® Urinalysis Reagent Strips

Simple to use

- Analytical sensitivity comparable to market leaders
- High quality color chart ensures accurate visual reading
- · Compatible for visual and analyzer reading
- Over 35 different combinations available

Multiple Packaging Options

Canister Packaging

- Available in 25, 50, and 100 strips per canister
- Available in 150 strips per canister without MA/CRE Combo

Pouch Packaging

- Individually packaged strips available in kits of 3 or 6 strips for visual reading only (includes 1 color chart)
- Unique packaging maintains 2 year shelf life for all strips in the kit

Shelf Life

- 2 year shelf life for unopened canisters offers cost savings
- 3 month shelf life for strips in opened canisters

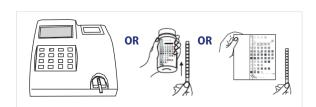
Reagent Strips 3 Easy Steps



STEP 1 Immerse strip into urine



STEP 2
Remove excess urine



STEP 2
Obtain results by analyzer or visual reading



Urinalysis Reagent Strip - Combinations for Visual Reading

Catalog Number	Number of Parameters	Type of Strip	Parameter Order (First parameter is closest to strip handle)	ASC	GLU	BIL	KET	SG	BLO	PH	PRO	URO	NIT	LEU	ALB	CRE	CA
U031-141	14	14C	Ca/Blo/pH/Cre/Nit/Ket/SG/Asc/Glu/Bil/Pro/Alb/Uro/Leu	*	*	*	*	*	*	*	*	*	*	*	*	*	*
U031-131	13	13CE	Blo/pH/Cre/Nit/Ket/SG/Asc/Glu/Bil/Pro/Alb/Uro/Leu	*	*	*	*	*	*	*	*	*	*	*	*	*	
U031-111	11	11A	Asc/Glu/Bil/Ket/SG/Blo/pH/Pro/Uro/Nit/Leu	*	*	*	*	*	*	*	*	*	*	*			
U031-101	10	10U	Glu/Bil/Ket/SG/Blo/pH/Pro/Uro/Nit/Leu		*	*	*	*	*	*	*	*	*	*			
U031-091	9	9U	Glu/Bil/Ket/SG/Blo/pH/Pro/Uro/Nit		*	*	*	*	*	*	*	*	*				
		8U	Glu/Bil/Ket/Blo/pH/Pro/Uro/Nit		*	*	*		*	*	*	*	*				
		8N	Glu/Ket/SG/Blo/pH/Pro/Nit/Leu1		*		*	*	*	*	*		*	*			
U031-081	8	88	Glu/SG/Blo/pH/Pro/Uro/Nit/Leu		*			*	*	*	*	*	*	*			
		8K	pH/Glu/Bil/Pro/Uro/Nit/Leu/Ket		*	*	*			*	*	*	*	*			
U031-071	7	7N	Glu/Ket/Pro/pH/Blo/Nit/Leu		*		*		*	*	*		*	*			
		6N	Glu/Pro/pH/Blo/Nit/Leu		*				*	*	*		*	*			
U031-061	6	6U	Bil/SG/Blo/Uro/Pro/Nit			*		*	*		*	*	*				
		5B	Glu/Ket/Pro/pH/Blo		*		*		*	*	*						
U031-051		5N	Glu/Pro/Nit/Blo/Leu		*				*		*		*	*			
	5	58	Glu/SG/Pro/pH/Blo		*			*	*	*	*						
		5U	Bil/Uro/Leu/Nit/Blo			*			*			*	*	*			
		4P	Glu/Pro/Nit/Leu		*						*		*	*			
		4S	Glu/SG/pH/Pro		*			*		*	*						
	_	4B	Glu/Pro/pH/Blo		*				*	*	*						
U031-041	4	4K	Glu/Ket/Pro/pH		*		*			*	*						
		4G	Pro/Glu/Leu/Blo		*				*		*			*			
		4N	Pro/Nit/Blo/Leu						*		*		*	*			
		3P	Glu/pH/Pro		*					*	*						
U031-031	3	3K	Glu/Ket/Pro		*		*				*						
0031-031		3G	Glu/Ket/pH		*		*			*							
		3N	Blo/Nit/Leu						*				*	*			
		2G	Glu/Pro		*						*						
		2K	Glu/Ket		*		*										
		2N	Nit/Leu										*	*			
U031-021	2	2B	Blo/Leu						*					*			
		2U	Bil/Uro			*						*					
		28	SG/pH					*		*							
		2C	Alb/Cre												*	*	
		1B	Blo						*								
		1P	pH							*							
U031-011	1	1G	Glu		*												
		1K	Ket				*										
		1R	Pro								*						

TYPE OF STRIP: 1-10 Parameters – 510(k) Cleared, CLIA Waived and CE Marked for sale in the European Community; 11-13 and 14 Parameters only CE Marked for sale in the European Community

Mission® Urinalysis Strips and Controls



Mission® Urine Controls

Accurate

- Use with Mission® and Mission® Expert Urinalysis
 Reagent Strips and Urine Analyzers for optimum quality control
- Validate urinalysis results and prevent procedure errors

Quick Testing

- Ensures accurate results for all parameters
- Obtain quick results in any setting
- Competitively priced

Two Types of Urine Controls available

- Ready to use without dissolving in distilled water
- 24 months shelf life for unopened controls at 2 8 °C
- Two Packaging Options

Dropper Tip Bottles

- Dropper tip bottles provide efficient use of the control solution
- Easily drop the control solution onto each reagent pad using the dropper tip bottle
- Controls can be used up to 30 days at room temperature
- Controls can be used until the expiration date if kept refrigerated

Diptubes

- Diptube packaging allows for QC testing in a way similar to using a urine specimen
- Simply dip the strip into the control solution and read results, or place on strip tray for analyzer reading
- Controls can be used 30 days at room temperature
- Do not dip more than 20 strips into the tube to avoid inaccurate results
- Controls can be used until the expiration date if kept refrigerated



Mission® Urinalysis Strips and Controls



Urine Control Specifications

Features	Specifications					
Product Name	Liquid Urine Control Liquid Diptube Urine Control					
Test Parameters LEU, NIT, URO, PRO, pH, BLO, SG, KET, BIL, GLU, ASC, ALB, CRE, CA (13)						
Solution Detection Levels	Level 1 Negative: LEU, NIT, URO, PRO, pH, BLO, SG, KET, BIL, GLU, ASC, ALB, CRE, CA					
	Level 2 Positive: LEU, NIT, URO, PRO, pH, BLO, SG, KET, BIL, GLU, ALB CRE, CA and Negative ASC					
Compatible Urine Strips	Mission® Urinalysis Reagent Strips and Mission® Expert Urinalysis Reagent Strips					
Reading Time/Stability	Refer to insert Refer to insert					
Storage Temperature 2 - 8 °C		2 - 8 °C				
Unopened Control Shelf Life	24 months 24 months					
Opened Control Stability 30 days at 15 - 30 °C or until the expiration date at 2 - 8 °C 30		30 days at 15 - 30 °C or until the expiration date at 2 - 8 °C				
Maximum Tests per Unit 20 to 40 tests/bottle 20 tests/diptube						

Ordering Information

Product Name	Product Number	Components	Kit Box Dimensions (LxWxH) & Weight	Carton Dimensions (LxWxH) & Weight	# Kits /Carton
Liquid Urine Control	U021-011	Level 1: 3 x 10 mL /bottle; Level 2: 3 x 10 mL/bottle	85 mm x 55 mm x 60 mm; 107 g	400 mm x 270 mm x 345 mm; 5.2 kg	198
		Level 1: 3 x 5 mL/bottle; Level 2: 3 x 5 mL/bottle	85 mm x 55 mm x 60 mm; 75 g	400 mm x 270 mm x 345 mm; 4.2 kg	198
		Level 1: 1 x 10 mL/bottle; Level 2: 1 x 10 mL/bottle	55 mm x 28 mm x 60 mm; 41 g	400 mm x 270 mm x 345 mm; 6.6 kg	228
		Level 1: 1 x 5 mL/bottle; Level 2: 1 x 5 mL/bottle	55 mm x 28 mm x 60 mm; 31 g	400 mm x 270 mm x 345 mm; 5.5 kg	228
Liquid Diptube Urine Control	U021-071	Level 1: 2 x 12 mL/diptube; Level 2: 2 x 12 mL/diptube	130 mm x 55 mm x 55 mm; 101 g	385 mm x 255 mm x 320 mm; 4.7 kg	30
		Level 1: 1 x 12 mL/diptube; Level 2: 1 x 12 mL/diptube	130 mm x 55 mm x 55 mm; 62 g	385 mm x 255 mm x 320 mm; 3.5 kg	30

All Urine Controls are 510(k) Cleared, CLIA Waived and CE Marked for sale in the European Community



aconlabs.com

ACON Laboratories, Inc. 10125 Mesa Rim Road, San Diego, CA 92121, U.S.A.

Tel: 1.858.875.8000 Fax: 1.858.200.0729 Email: info@aconlabs.com

PN 2170004302 • Date 12/17



Package Insert

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

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. 46 In starvation diets, or in other abnormal carbohydrate metabolism situations, ketones appear in the urine in excessively high concentration before serum ketones are elevated.

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 1.016-1.022.8 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 green 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.

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). 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. 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 guestionable 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.
pН	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 μ mol/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 secon		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

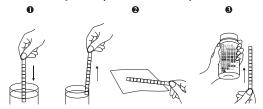
· Package insert

· Specimen collection container Timer

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 \geq 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 rifampen that might be mistaken for positive bilirubin. 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. Urine specimens of high pigment, and other substances containing sulfhydryl groups may occasionally give reactions up to and including trace (±).9

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

Blood: A uniform blue color indicates the presence of myoglobin, hemoglobin or hemolyzed erythrocytes. 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. 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 cephalexin, 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

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Number: 1150310404 Effective date: 2011-03-14