GUIDE BOOK

FRENDTM System Rapid Quantitative Immunoassay Analyzer



Contents

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FREND[™] FDA 510(k) Letter of Clearance



Nano**EnTek**Inc.

Indications for Use

510(k) Number (if known): k124056

Device Name: FREND™ PSA Plus on the FREND™ system

Indications For Use:

The FREND[™] PSA Plus as performed on the FREND[™] system, is a quantitative in vitro diagnostic test which measures total Prostate Specific Antigen (PSA) in human serum and plasma. The NanoEnTek FREND[™] PSA Plus is designed for *in vitro* DIAGNOSTIC USE ONLY for the quantitative measurement of total Prostate Specific Antigen (PSA) in human serum, heparinized plasma, and EDTA plasma using the FREND[™] System. This device is indicated for the serial measurement of total PSA in serum, heparinized plasma and EDTA plasma to be used as an aid in the management of patients with prostate cancer.

The FREND[™] PSA Plus is indicated for use in clinical laboratories upon prescription by the attending physician as an aid to clinicians in managing patients with prostate cancer.

The information provided from this test may supplement decision-making and should only be used in conjunction with routine monitoring by a physician and the use of other diagnostic procedures. Because of the variability in the effects of various medications used in the treatment of prostate cancer, clinicians should use professional judgment in the interpretation of PSA results as an indicator of disease status.

Prescription Use X (Part 21 CFR 801 Subpart D) AND/OR

Over-The-Counter Use _____ (21 CFR 807 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH; Office of In Vitro Diagnostics and Radiological Health (OIR)

Maria M. Chan -S

Division Sign-Off Office of In Vitro Diagnostics and Radiological Health

510(k): k124056

510(k) Cleared Letter



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Food and Drug Administration 10903 New Hampshire Avenue Document Control Center – WO66-G609 Silver Spring, MD 20993-0002

March 14, 2014

NANOEN TEK USA, INC. C/O JUDITH LOEBEL DOCRO I JACKS HILL ROAD, SUITES A & B OXFORD CT 06478

Re: K131928

Trade/Device Name: FREND™ TSH Regulation Number: 21 CFR 862.1690 Regulation Name: Thyroid stimulating hormone test system Regulatory Class: II Product Code: JLW Dated: February 4, 2014 Received: February 7, 2014

Dear Ms. Loebel:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Parts 801 and 809); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

510(k) Cleared Letter



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public HealthSewice

Food and Daug Administration 10903 New Hampshire Avenue Document Control Center – W066-6609 Silver Spring, MD 20993-0002

February 17, 2016

NANOENTEK USA INC MAUREEN GARNER PRESIDENT 1983 HAZELWOOD ROAD TOMS RIVER NJ 08753

Re: K152422

Trade/Device Name: FREND™ Free T4 Test System Regulation Number: 21 CFR 862.1695 Regulation Name: Free thyroxine test system Regulatory Class: II Product Code: CEC Dated: December 31, 2015 Received: January 04, 2016

Dear Maureen Garner:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug and Cosmetic Act(Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Parts 801 and 809); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.



FREND[™] Introduction

- I. What is FREND[™] System?
- II. Advantages of FREND[™] System
- III. FREND[™] System Tests
- **IV.FREND[™] Measurement Principle**
- V. FREND[™] Quality Control

Rapid Quantitative Immunoassay Analyzer

The FREND[™] System is a small, fast and near-patient in vitro diagnostic for a quantitative measurement of biomarkers in patient samples.

Feature





* FREND: Fluorescence Response Enhanced Novel Diagnostic

FAST

With the fast and easy procedure of testing, it is expected **to increase patients' satisfaction and a hospital's profitability** by improving effectiveness of testing.



• 3~10 min. Check Test Results

- Available to get a test result while a patient stays in labs or hospital
- Available for a patient to consult a doctor in same day a test is performed

• Simple 3 steps Test Procedure

- Add sample -> Insert cartridge -> Get results

Easy to use

Intuitive GUI of touch screen provides users with convenience of using the device, saved data is able to be transmitted to PC by using USB driver.



Accurate

FDA 510(k) Clearance (PSA Plus, TSH, Free T4, Testosterone, Vitamin D)

| U. Pro | S. Food and Drug Administrat otecting and Promoting Your Health | ion | A to Z Ind | ex Follow FDA ular Searches | FDA Voice Blog |
|-----------|--|-------------------------|----------------|------------------------------------|----------------|
| | New Search | o Excel Download File | es More A | bout 510(k) | |
| | Device Name | Applicant | Number | Date • | |
| | Frend Tsh (Reagent Cartridge) | Nanoen Tek Usa, Inc. | <u>K131928</u> | 03/14/2014 | |
| | Frend Psa Plus (Reagent Cartridge) | Nanoen Tek, Inc. | <u>K124056</u> | 05/29/2013 | |

High and Remarkable Correlation with Central Lab Machine (PSA Plus, TSH)



 Correlation value of FREND PSA is more than 0.96 compared to TOSOH ST AIA-PACK PSA assay.



• Correlation value of FREND TSH is more than **0.98** compared to TOSOH ST AIA-PACK TSH assay.

External controller

FREND[™] provides not only for device quality control but also assay quality control. Check value



Advantages of FREND[™] System

Accurate



Compact

Light (3kg) and compact size (240mm X 260mm X 175mm) make the device free from moving it and installing sites.



FREND™ System Tests

| | Urology | Thyroid | Cardiac | Nutrient | Infection |
|------------------------------|--------------|--------------------------|--|-----------|-----------|
| Sandwich | PSA | TSH | Cardiac Triple (Myoglobin / Troponin I / CKMB) | | РСТ |
| Assay | | | BNP | | |
| | | | Troponin I | | |
| \square | Testosterone | Free T4 | | Vitamin D | |
| Competition Assay with | | Thyroid Duo (TSH/FT4) | | | |
| Block | | Total T3 | | | |



FREND™ System Tests

| Emergency | Cardiac Triple | BNP | Troponin I | РСТ |
|----------------------|---|---------------------|-----------------|--|
| AMR | Myoglobin : 5.00 ~ 500.00 ng/mL Troponin I : 0.05 ~ 20.00 ng/mL CK-MB : 1.00 ~ 80.00 ng/mL | 30.0 ~ 2500.0 pg/mL | 0.05 ~ 20 ng/ml | 0.07 ~ 32 ng/mL |
| Sample Type | Plasma (EDTA) | Plasma (EDTA) | Plasma (EDTA) | Serum/Plasma (Citrate/Lithium heparin/EDTA) |
| Sample volume | 35 μL | 35 μL | 35 µL | 35 µL |
| Reaction Time | < 3 min. | < 3 min. | < 3 min. | < 3 min. |
| 1 Box | 25 | 25 | 25 | 25 |
| Storage | 2~8°C (35~46°F) | 2~8°C (35~46°F) | 2~8°C (35~46°F) | 2~8°C (35~46°F) |

| Thyroid | TSH | Free T4 | Total T3 | Thyroid Duo(TSH/FT4) |
|---------------|-----------------------------------|--|--|--|
| AMR | 0.06 ~ 25mIU | 0.40 ~ 6.00 ng/dL | 0.25 ~ 8.00 ng/mL | TSH: 0.06 ~ 25mIU FT4: 0.40 ~ 6.00 ng/dL |
| Sample Type | Serum/Plasma (Lithium heparin) | Serum/Plasma (Lithium heparin) | Serum/Plasma (Lithium heparin) | Serum/Plasma (Lithium heparin) |
| Sample volume | Cartridge : 35 µL | Pretreatment Tube: 70µL Cartridge loading : 35µL | Pretreatment Tube : 70µL Cartridge : 35µL | Pretreatment Tube : 70µL Cartridge : 35µL |
| Reaction Time | < 3 min. | Incubation Time: 5 min. Cartridge reaction: < 3 min. | Incubation Time: 5 min. Cartridge reaction: < 3 min. | Incubation Time: 5 min. Cartridge reaction: < 3 min. |
| 1 Box | 25 | 20 | 20 | 20 |
| Storage | 2 ~ 8 °C (35 ~ 46 °F) | 2 ~ 8 °C (35 ~ 46 °F) | 2 ~ 8 °C (35 ~ 46 °F) | 2 ~ 8 °C (35 ~ 46 °F) |

| Urology | PSA Plus | Testosterone |
|---------------|--|---|
| AMR | 0.05 ~ 25ng/ml | 20 ~ 1500 ng/dL |
| Sample Type | Serum/Plasma (Lithium heparin/EDTA) | Serum/Plasma (Lithium heparin/EDTA) |
| Sample volume | 35µL | Pretreatment Tube: 70µL Cartridge : 35µL |
| Reaction Time | < 3 min. | Incubation Time: 5 min. Cartridge reaction: < 3 min. |
| 1 Box | 25 | 20 |
| Storage | 2 ~ 8 °C (35 ~ 46 °F) | 2~8 °C (35~46 °F) |

| Vitamin | Vitamin D | |
|---------------|---|--|
| AMR | 10 ~ 110 ng/mL | |
| Sample Type | Serum/Plasma (Lithium heparin) | |
| Sample volume | Dilution Tube: 35 μL Pretreatment Tube: 70μL Cartridge loading : 35μL | |
| Reaction Time | Incubation Time: 15min. (AP) Cartridge reaction: < 3 min. | |
| 1 Box | 20 | |
| Storage | 2 ~ 8 °C (35 ~ 46 °F) | |

Lap-on-a-Chip Technology



[FREND Cartridge structure]



• One or multiple analytes are quantified by measuring laser-induced fluorescence on the Cartridge.

• The Concentration of the analyte in an unknown sample is calculated with the ratio of the fluorescent intensity of the Test zone and the Reference zone.

FREND™ QC Material

Quality Control – 1. Test to Test Variations

Example : Graph related to Fluorescence intensity on the detection area Cartri dge1 Cartri dge2 Cartri dge3 Cartri dge3 Cartri Cartr Cartri Ca

| | Fluorescen | ce Intensity | Ratio |
|-------------|------------|----------------|------------------|
| | Test Zone | Reference Zone | (Test/Reference) |
| Cartridge 1 | 32557 | 112542 | 0.289 |
| Cartridge 2 | 24603 | 84160 | 0.292 |
| Cartridge 3 | 26133 | 93322 | 0.280 |
| Cartridge 4 | 30427 | 104619 | 0.291 |
| Cartridge 5 | 21302 | 74288 | 0.287 |
| AVERAGE | 27004 | 93786 | 0.288 |
| S.D. | 4516 | 15348 | 0.005 |
| CV% | 16.7 | 16.4 | 1.7 |

Ratio Correct Test-to-Test variations

Quality Control – 2. Lot to Lot Variations





Code chip correct Lot-to-Lot variations

Verification of Value Difference among Sites Tests Performed





Bio-Rad Liquicheck[™] Immunoassay Plus Control CLINIQA Liquid QC[™] Tumor Marker Control

Users are able to verify the normality of FREND reagents by External Control.

Package Insert of External Control

| | Levels 1, 2 and 3 | | | | |
|--|--|---|----------------------------|----------------------------|-------------------|
| | Level1 | Level2 | Level3 | LOT | EXP |
| TSH (mIU/L) | 0.77 (0.64~0.90) | 7.26(6.03~8.37) | >25 | 40860 | 2016-08-31 |
| | | | | | |
| | 0.35(0.23~0.46) | 4.67(4.08~5.25) | >25 | 40860 | 2016-08-31 |
| PSA (ng/mL) | 0.32(0.21~0.42) | 4.21(3.69~4.71) | >25 | 40850 | 2016-03-31 |
| | 0.35(0.23~0.47) | 5.26(4.26~6.48) | >25 | 40840 | 2015-11-30 |
| Liquid QC [™] | Immunoassay Con | trol Tri-Level | 5.40 | | |
| Liquid QC [™] C€∞5 | Immunoassay Con REF 94104 | trol Tri-Level | 5-10 | | |
| Liquid QC [™] C€∞5 | Immunoassay Con ⁰⁰ REF 94104 Level1 (LOT 120818 | trol Tri-Level Lot 1210176 201 Level2 32A) (LOT 120818 | 5-10 13A) (LOT | Level3 1208184A) | EXP |
| Liquid QC [™] C€∞5 TSH (mIU/I | Immunoassay Con EFF 94104 (LOT 120818 2) 1.50(0.738~2 | trol Tri-Level Lot 1210176 201 Level2 32A) (LOT 120818 2.26) 16.2(13.0~19 | 5-10 13A) (LOT 9.5) | Level3 1208184A) >25 | EXP 2015-10-31 |
| Liquid QC [™] C€∞5 TSH (mIU/I | Immunoassay Con (Note: 10,000,000,000,000,000,000,000,000,000, | trol Tri-Level Lot 1210176 201 Level2 32A) (LOT 120818 2.26) 16.2(13.0~19 | 5-10 13A) (LOT 19.5) | Level3 1208184A) >25 | EXP 2015-10-31 |

FREND[™] Quality Control

FREND™ System Quality Control



When to be performed?

- ✓ When FREND System is initially installed.
- ✓ The day patients' specimens are tested.
- ✓ After relocating or re-installing FREND System.
- ✓ When FREND System has a certain error
- ✓ When users judge Quality Control is needed.

Quality Control Result Date/Time: 2014-2-19 10:9

Step1. Laser Power : Pass ! Step2. Laser Alignment : Pass ! Step3. Calculate Ratio : Pass !

Q.C Pass!

What is checked?

- ✓ Laser Power Check
- ✓ Optical Structure Check
- ✓ S/W Check



FREND[™] Normal Reference Value



www.nanoentek.com

Nano**EnTek**Inc.

FREND[™] Normal Reference Value

| ltem | Normal Reference Value |
|--------------|--|
| PSA | <4 ng/mL |
| Testosterone | 2.219 to 9.925 ng/mL |
| TSH | 0.35~4.94 mIU/L |
| FT4 | 0.71~2.16 ng/dL |
| TT3 | 0.6~1.6 ng/mL |
| Myoglobin | < 120 ng/ml |
| CK-MB(Mass) | 6 ng/ml |
| Troponin I | 0.4 ng/ml |
| BNP | < 100 pg/ml |
| PCT | *Lower respiratory disease : < 0.1 ng/mL : Normal 0.1 ≤ value < 0.25 ng/mL : Doubtful 0.25~0.5 ng/mL : Minor degree ≥ 0.5 ng/mL : Diseased *Bacterial infection < 0.5 : Normal 0.5 ≤ value < 2 ng/mL : Systemic sepsis 2 ≤ value < 10 ng/mL : Severe sepsis ≥ 10 ng/mL : Sepsis shock |
| Vitamin D | < 10 ng/mL : Deficient 10~30 ng/mL : Insufficient 31~100 ng/mL : Sufficient > 101 ng/mL : Toxic |

**FREND System was developed with reference to a particular central lab machine. The normal reference value provided above is based on the machine's reference value.



FREND[™] Literature



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Nano**EnTek** Inc.

FREND[™] PAPER

DE GRUYTER

Hae-il Park, Seungok Lee*, Yonggoo Kim, Dong-Yeok Shin, Changseop Lee, Sunmi Han, Chanil Chung, Jun Keun Chang and In Bum Seo

Analytical performance of a new one-step quantitative prostate-specific antigen assay, the FREND™ PSA Plus

Abstract

Background: We evaluated the analytical performance of a new one-step rapid quantitative sandwich immunoassay for total prostate-specific antigen (tPSA), the FREND^{IM} PSA Plus (FREND PSA) (NanoEnTek Inc., Seoul, Korea).

Methods: The imprecision, linearity, hook effect, detection limit (LoD), and interference were evaluated and trueness verification and matrix validation were performed. For method comparison, 79 patient specimens were analyzed with FREND PSA and two comparative tPSA assays (Architect®total PSA and cobas® total PSA assay).

Results: Total CVs of the imprecision for low (0.208 ng/mL), medium (4.051 ng/mL), and high PSA levels (5.469 ng/mL) were 15.9%, 6.4%, and 9.1%, respectively. Linearity was observed from 1.01 to 19.15 ng/mL and the hook phenomenon was absent up to 171.48 ng/mL. The LoD was 0.094 ng/mL. The regression equations between FREND (y) and Architectorcobaswere as follows: y=0.0133+1.054x (r=0.973), y=-0.2144+1.066x (r=0.977), respectively. Differences between FREND PSA and the comparative methods at a medical decision level of 4.0ng/mL were less than the optimum specification bias (9.3%). The percentage biases from the trueness verification and interference test were less than the desirable specifications for bias (18.7%). The plasma tPSA level measured with lithium heparin or K2EDTA was comparable to that in the serum.

Conclusions: The FREND PSA provided reliable analytical performance and test results in comparison to two widely used tPSA assays. It is a simple and rapid test for tPSA and can be applied in point-of-care testing.

Keywords: FREND[™] PSA Plus; rapid quantitative immunoassay; total prostate-specific antigen. Hae-il Park: Department of Laboratory Medicine, College of Medicine, The Catholic University of Korea; and Laboratory Development and Evaluation Center, Clinical Research Coordinating Center, The Catholic University of Korea Catholic Medical Center, Seoul, Republic of Korea

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Changseop Lee, Sun mi Han, Chanil Chung and Jun Keun Chang: Immunoassay Team, R&D Division, NanoEnTek, Inc., Seoul Republic of Korea

In Bum Seo: Department of Laboratory Medicine, Kangwon National University Hospital, Choonchun, Republic of Korea

Introduction

Total prostate-specific antigen (tPSA) is the most useful tumor marker for early detection, staging, prognosis prediction, and monitoring of prostate cancer [1, 2]. Although tPSA levels increase in patients with benign prostatic diseases such as prostatic hyperplasia and prostatitis as well as in those with prostate cancer and can be influenced by age and race [2], tPSA measurements and digital rectal examination are widely used to detect prostate cancer in men above 50 years of age [3]. tPSA \geq 4 μ g/L is generally accepted as the cut-off value. for prostatic biopsy, although this threshold remains the subject of debate [1, 2, 4]. There are two forms of PSA in the circulating blood: free PSA (fPSA) and complexed PSA (cPSA) containing al-antichymotrypsin (ACT), which is the major form of macroglobulin [2, 5]. tPSA is the sum of fPSA and cPSA, and can be measured by immunoassay [2, 5]. Two WHO reference materials for PSA, 96/670 (90:10) and 96/668, were introduced in 2000

Brought to you by | Catholio Medical College Authenticated | 81.78.100.185 Denveload Data | 12/18/13 7:53 AM

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FREND™ PAPER

Performance Evaluation of a New One-Step Quantitative Prostate-Specific Antigen assay, the FREND[™] PSA Plus



Hae-il Park', Seungok Lee'-², Dong Wook Jekarl'-², Yonggoo Kim', Changseop Leeª, Sunmi Hanª, Chanil Chungª, Jun Keun Changª

·Department of Laboratory Medicine, College of Medibine , The Cattiolic University of Korea; ·Department of Laboratory Medicine , Incheoni St. Many's Hospital, The Cattiolic University of Korea; ·NanoEnTek, Inc. Seon, Korea

Introduction

• Total prostate-specific antigen (tPSA)is the most widely used serum biomarker for early detection and monitoring of prostate cancer.

•The aim of this study was to evaluate a new one-step quantitative total prostate- specific antigen (tPSA) assay, the FRENDMPSA Plus (NanoEnTek Inc, Secul, Korea) that has been developed for point-of-care testing.

•The principle of FREND^{IM} PSA Plus is a rapid sandwich immunoassay for determining PSA concentration on a test cartridge by measuring laserinduced fluorescence in FREND^{IM} system (Figure 1).

Meterials and methods

 The imprecision, linearity, hook effect, detection limit, and method comparison of the FREND^{IM} PSA Plus (FREND PSA) were evaluated according to Clinical and Laboratory Standard Institute (CLSI) guidelines, EP-05-A2, EP-06-A and EP-17-A2.

 For the method comparison, Aliquots of 79 clinical serum samples over the AMR claimed by manufacturer's instruction (0.1-25.0 ng/mL) were measured in duplicate during 5 days with FREND PSA and two comparative PSA assays as follows: Architect[×] Total PSA assay (Architect PSA) using Architect /2000 SR (Abbott Diagnostics); cobas[×] total PSA assay (cobas PSA) using cobas e 601 analyzer (Roche Diagnostics).

•The results was analyzed by using StatisProi^M version 2.00.00 (Analyses-it^x Software Ltd. and CLSI[×], USA).

Results

•Total CVs of the imprecision for low (0.208 ng/mL), medium (4.051 ng/mL), and high PSA levels (15.469 ng/mL) were 15.9%, 6.4%, and 9.1%, respectively.

•The linearity was observed from 1.01 to 19.15 ng/mL.

•The limit of detection was 0.094 ng/mL.

Hook phenomenon did not appear up to 171.48 ng/mL.

In the comparison study, the regression equations of the FREND PSA (y) with Architect PSA, and cobas PSA were obtained as follows: y = 1.054x + 0.0133 (r=0.973), y =1.066x -0.2144 (r=0.977), respectively (Table 1 and Figure 2).

Differences between FREND PSA and both of two comparative assays at a medical decision level of 4.0 ng/mL were less than optimum specification bias (9.3%).

Conclusion



Figure 1. Principle of the FREND™ PSA Plue

(a) The PREND™ PSA Plus consists of a single-use disposable, FREND™ test cartridge and a portable, automated FREND™ system. (b) The concentration of a naiyte hi an unknown sample is calculated by comparing testicontrolline ratio with a calculation curve obtained from different concentration of analyte (ngmil).

Table 1. Methods comparison

| Congenitive nethod | Architect | Other |
|------------------------------|---------------------------|---------------------------|
| Measuring interval | 0.84~5.8.28 | 1.035-19.295 |
| n | TN . | LAL N |
| r | u ar a | цатт |
| Constant untercapte 35% CI i | 0.0733 (-0.977 T. 0.9339) | 40.2444 (40.7092) 0.2804(|
| Propertional isopas95% Ch | 1.054 (0.998, 17710) | nuee munal no rait |
| ×., | 4.253 | 1.162 |
| Umerence (95% C) | | |
| et Angoli. | 0/05 (-0.011, 0.236) | 0.048 (41287, 0.383) |
| et 'UngenL | 0.409 (-0.045, 0.232) | 0.44° (10.16°, 10.12°) |



Figure 2. SostBerplot of PSA (s) between FREND (;) and Architect (s) and (b) between FREND (;) and cobst (s). Gray the represents the the of Bentby and red like does the arregress binequation. Each blue cross symbol represents the average of duplicate measurements.

•The FREND PSA showed a reliable performance and results overall comparable to those of two widely accepted PSA assays.

 In practice, the FREND PSA was easy to perform and the software of PREND[™] system showed user-friendly. It had attractive benefits such as small sample volume (30µL), rapid analytic time (6min) and portable. It seems to be useful for one-stop monitoring post-treatment status of prostatic cancer patients and point-of-care testing.

Reference

Comparison of 6 automated assays for total and the prostate-specific antigen with special returns to her reactually lowerd the WHO 96670 returns preparation. Why Orem 2006;52:196874.
 We signed QC. http://westgard.com/blockatabase1.htm, Accessed: 25, Aprill, 2013.

FREND™ PAPER

Clin. Lab. 2016;62 XXX-XXX ©Copyright

SHORT COMMUNICATION

Performance Evaluation of the FRENDTM Cardiac Triple Cartridge on the FRENDTM System

Kyunghoon Lee^{1, 2}, Minje Han^{2, 3}, Sang Hoon Song^{1, 2}, Kyoung Un Park^{1, 4}, Woon Heung Song⁵, Junghan Song^{1, 4}

¹ Department of Laboratory Medicine, Seoul National University College of Medicine, Seoul, Korea ² Department of Laboratory Medicine, Seoul National University Hospital, Seoul, Korea ¹ Department of Laboratory Medicine, Skeikk Khağla Specialty Hospital, Ras Al Khainak, U.A.B ⁴ Department of Laboratory Medicine, Seoul National University Bundang Hospital, Seongnam, Korea ⁴ Department of Biomedical Laboratory Science, Skeikk and University Bundang Hospital, Seongnam, Korea

SUMMARY

Background: We evaluated the performance of the FREND¹⁵⁸ Cardiac Triple cartridge on the FREND¹⁵⁸ system in the detection of cardiac markers-myoglobin, cardiac troponin I (cTnI), and creatine kinase-MB (CK-MB). Methods: Quantitative immunoassays were performed using the FREND¹⁵⁶ system (NanoEnTek, Seoul, Korea) and its cartridge. The precision, detection limits, linearity, and correlation with the Siemens Dimension Vista⁹ 500 (Siemens Healthcare Diagnostics, Deerfield, IL, USA) were evaluated. The cutoff value for each marker was calculated in healthy individuals (men and women, n = 138 each).

Results: The coefficients of variation for imprecision were less than 19.0% at low and high serum concentrations. The lower limits of quantification for myoglobin, cT nI, and CK-MB were 3.11, 0.073, and 0.70 ng/mL, respectively. Acceptable linearity was achieved for each marker ($\mathbb{R}^2 < 0.99$). The results from the FRENDTM system were in good agreement with those from the Siemens Dimension Vista (correlation coefficients > 0.9). The cutoff values in male and female individuals (n = 138 each) were 104.3 and 98.9 ng/mL, respectively, for myoglobin, and 4.35 and 5.37 ng/mL, respectively, for CK-MB. The cutoff value for cT nI was 0.073 ng/mL.

Conclusions: The FREND^{INS} Cardiac Triple cartridge exhibited good precision, clinically acceptable linearity, and reliable correlation with the Dimension Vista.

(Clin. Lab. 2016;62:xx-xx, DOI: 10.7754/Clin.Lab.2015.150841)

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Short Communication accepted September 15, 2015

Clin. Lab. 4/2016

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KEY WORDS

analytical performance, cardiac biomarker, cardiac troponin, creatine kinase-MB, myoglobin

INTRODUCTION

Cardiovascular disease (CVD) is the leading cause of adult mortality globally; an estimated 17.5 million people died from CVD in 2012, representing 31% of all global deaths. Of these deaths, an estimated 7.4 million were caused by coronary heart disease and 6.7 million were caused by stroke [1].

Appropriate medical intervention in the acute setting is closely related with prognosis, and cardiac biomarkers likely play important roles in patients with atypical

FREND™ PAPER



Thyroid – Translational &Clinical

FREND[™] Thyroid Duo: a new way of NanoEnTek Helping patients with subclinical thyroid dysfunction

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OBJECTIVES

To evaluate the analytical performance a

FREND™ Thyroid Duo immunoassay on FREND™ system FREND™ System Access administration of the birth opportion in the birth opportion of the birth opportion opportion of the birth opportion opporting opportion oppor

METHODS

The analytical performance studies (sensitivity, precision, linearity, interference and accuracy) were performed according to the CLSI protocols (EP17, EP05, EP06, EP07 and EP09). For the method comparison, serum TSH and free T4 were assayed by FREND™ and Architect i1 000 (Abbott Diagnostics, Abbott Park, IL).

RESULTS

The FREND[™] Thyroid D uo demonstrated acceptable imprecision of %C V (<10%) in low, intermediate, and high level sam ples for both analytes. The linearity of the assay was found to be acceptable in the range of 0.06~25 mIU/L for TSH and 0.4~6 ng/dL for FT4. Method comparisons between Abbott Architect's assays and NanoEnTek's FREND Thyroid Duo assay were made and no significant deviation from linearity was found. No significant interference was observed for both analytes from bilirubin, Intra-lipid and total protein up to concentrations of 20 mg/dL, 3 g/dL, and 12 g/dL respectively.



CONCLUSIONS

Conclusion: The NanoEnTek's FREND™ Thyroid Duo assay represents a rapid, accurate and convenient mean of measuring TSH and FT4 quantities in human serum on FREND™ system. The subclinical thyroid dysfunction may be screened or monitored in a clinic or physician's office using this microfluidic 2-in-1 thyroid assay with ease and comfort.

References

1. Gharib et al., J. Clin. Endocrinol Metab. (2005) 90:581-585

 Astles et al., CLSI guideline EP19, 2nd ed. June 2015.

FREND[™] PAPER





FREND[™] Heating Block / AP & Software Update Guide



Nano**EnTek**Inc.

FREND[™] Heating Block Operation Procedure



FREND[™] AP Instructions for Use

FREND[™] AP Operation procedure



Instruction for Software Update

Please check FREND firmware version first

- 1. Click 'SETUP' and then 'System view' button to check firmware version.
- 2. Only 1.1.2.3 firmware version can be used.
- * If FREND F/W is not 1.1.2.3, please contact to sales team (sales@nanoentek.com).



Software Update Guide

* If FREND S/W is lower than 1.1.0.6, please back up the data first.

1. Connect USB flash drive to the USB H port on the back of the FREND. 2. Click 'SETUP' and then 'S/W Update' button.



3. It start software update automatically





4. Reboot FREND by turning off after the update is done.



Software Added Functions Ver.1.3.1

Display Plan



Software Added Functions

1. Instruction of Setting 'Normal Range'



Go to 'Data' page and click 'Result' button to check the detailed test result.



Go to 'Item' page and click 'Normal Range' button.



Input the range.



Go to 'Item' page again to final confirmation



Verify if set range is applied.

Software Added Functions

2. Instruction of Setting 'Factor Value'



Go to 'Item' page and click 'Factor' button.



For a trial, modify the basic factor value '1' into '0.5'.



Verify if Factor value is modified into 0.5

※ Caution

Factor value doesn't apply to the results that have already saved.
 Please modify Factor value before test.

Software Added Functions Ver.1.3.1

1. Normal Range Setting

Select 'Normal Range' button in 'Item' page



If 'Normal Range' setting is not necessary,

 Input '0 ~ 0'.

 If 'Cut off' setting is necessary,

 Input '0 ~ Cut off value'.

 If 'Normal Range' setting is necessary,

 Min. Value ~ Max. Value

Ex) Cardiac Triple

2. Factor Value Setting

Select 'Factor' button in 'Item' page



- **Factor Value**
- : Displayed Result
- = Original Result value x Factor value
- * Basic factor value = 1

Software Added Functions Ver.1.3.1

Simpler Format of Saved Data

- Previous format of saved data was comparatively complicated for users to check.
- Features of Simpler Format of Saved Data
 - Same format as the data displayed in 'Data' page.
 - Unnecessary information deleted.
 - Measurement unit added
- Instruction of saving data







Operation Manual of FREND mini-pipette



Nano**EnTek**Inc.

Pipette



General Description

These fixed volume micropipettes are Medical devices used for dispensing fixed quantity of fluids of liquids.

General Setting and Operation

- \checkmark Fix a compatible tip on the 'tip cone'.
- \checkmark The pipette is now ready for pipetting.
- It is highly recommended to understand and practice the 'plunger' operation which has two stages.
- ✓ The first stage is to fill-in and dispense the solution whereas the second stage is used only to dispense the last drop out of the tip.
- ✓ For the first stage operation, depress the 'plunger' gently until it stops by itself (never depress the 'plunger' with jerk). Give a pause at this stage and then depress the 'plunger' further down applying little force to achieve the second stage.

Ready Position

First Stage

Second Stage







Reverse Technique

- 1. Depress the 'plunger' all the way to the second stage, dip the tip in the solution.
- 2. Release the 'plunger' slowly to fill the tip.
- 3. Depress the 'plunger' to the first stage. Required amount of liquid is dispensed.
- 4. Discard the liquid remaining in the tip or pipette it back in the original container.







Ready Position

* If you want to reduce the occurrence of air bubbles, please use the 'Reverse Technique' It is not essential.



FREND[™] Trouble Shooting Guide



www.nanoentek.com

Nano**EnTek**Inc.

FREND procedure to use

Lab. Protocol: 10 min. 3000~4000rpm FREND: 2~3 min. > 4000rpm



FREND™ Trouble Shooting Guide

In case EMTF 02, 04 - How to use Block Reagent buffer

PSA Plus/TSH/Cardiac Triple/Troponin I/BNP/PCT

01 02 Using a sterile tip, add 70µℓ (two drops of Use a finger to gently tap the tube to mix 35µl sample) of a patient sample in the the sample (approx. 15 times). tube. Leave the tube for 30 seconds. 03 04 Load 35µℓ of the sample mixture (one drop Insert the FREND cartridge into FREND System. of **35µ***ℓ* sample) on the FREND cartridge. Caution: Pay attention to avoid the formation

of bubbles when using a pipette.

Why EMTF 02, 04 Might Happen?

- 1. The sample from a patient who get a treatment with monoclonal mouse antibodies may contain human anti-mouse antibodies(HAMA). In this case, there may be a possibility that test result may be abnormal or no results come out.
- 2. Heteroantibody in human serum may interfere with IVD immunoassay and may interact with immunoglobulins reagent. In case the patient sample has heteroantibody, test result many be abnormal. Additional information may require.
- 3. FREND system is designed to get less effect from HAMA and heteroantibody. But if there is a big difference in test result between FREND system and laboratory equipment, additional tests to verify is recommended.
- 4. Every immunoassay equipment available in the market has same issue and FREND system has the same.

EMTF 02, 04

- In case Block Reagent buffer has no effect



Click 'TEST' button



Type 'BIO0915' Patient ID



Clik 'OK' button



Touch left top screen



Check the graph



Take the photo or screen shot and e-mail to ivdst@nanoentek.com

