TRAINING UPDATE

Lab Location: Department:

SGMC & WAH

Core

Date Distributed:
Due Date:
Implementation:

4/4/2016 4/30/2016 **5/1/2016**

DESCRIPTION OF PROCEDURE REVISION

Name of procedure:

B-type Natriuretic Peptide (BNP) by ADVIA Centaur CP SGAH.C73, WAH.C68 v5

Description of change(s):

Section	Reason	
1	Update local code	
3.2	Change room temp. stability to 4 hours, add note for transfer pipettes	
4.2	Add hazard information	
5.3	Update steps 1 - 3	

This revised SOP will be implemented on May 1, 2016

Document your compliance with this training update by taking the quiz in the MTS system.

Quest Diagnostics
Site: Shady Grove & Washington Adventist Hospital

Approved draft for training (version 5)

Technical SOP

Title	B-type Natriuretic Peptide (BNP)	by ADVIA C	Centaur CP
Prepared by	Ashkan Chini	Date:	5/1/2012
Owner	Robert SanLuis	Date:	6/20/2013

Laboratory Approval	Local Effective Date	:
Print Name and Title	Signature	Date
Refer to the electronic signature page for approval and approval dates.		

Review		
Print Name	Signature	Date

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1. TEST INFORMATION

Assay	Method/Instrument	Local Code
B-type Natriuretic Peptide	ADVIA Centaur CP	BNPT

Synonyms/Abbreviations	
BNP	

Department	
Chemistry	

2. ANALYTICAL PRINCIPLE

The ADVIA Centaur BNP assay is a fully automated two-site sandwich immunoassay using direct chemiluminescent technology, which uses constant amounts of two monoclonal antibodies. The first antibody, in the Lite Reagent, is an acridinium ester labeled monoclonal mouse anti-human BNP F(ab') fragment specific to the ring structure of BNP. The second antibody, in the Solid Phase, is a biotinylated monoclonal mouse anti-human antibody specific to the C-terminal portion of BNP, which is coupled to streptavidin magnetic particles.

SPECIMEN REQUIREMENTS **3.**

3.1 **Patient Preparation**

Component	Special Notations
Fasting/Special Diets	N/A
Specimen Collection and/or Timing	Normal procedures for collecting and storing plasma may be used for samples to be analyzed by this method.
Special Collection Procedures	N/A
Other	N/A

Specimen Type & Handling 3.2

Criteria		
Type -Preferred	Plasma (K2 EDTA)	
-Other Acceptable	None	
Collection Container	Lavender Top Tube	
Volume - Optimum	Full Tube	
- Minimum	1 mL	
Transport Container and	Collection container or Plastic vial at room temperature, as	
Temperature	BNP is unstable in glass containers.	
Stability & Storage	Room Temperature: 4 hours	
Requirements	Refrigerated: 2-8° C 24 hours	
	Frozen: -70° C N/A	
Timing Considerations	If unable to run the test within 4 hours, then centrifuge the	
sample and store separated plasma at 2 - 8° C until test		
Unacceptable Specimens	Specimens that are unlabeled, improperly labeled, or those	
& Actions to Take	that do not meet the stated criteria are unacceptable.	
	Request a recollection and credit the test with the	
	appropriate LIS English text code for "test not performed"	
	message. Examples: Quantity not sufficient-QNS; Wrong	
	collection-UNAC. Document the request for recollection in	
	the LIS.	

Criteria		
Compromising Physical	Gross hemolysis. Reject sample and request a recollection.	
Characteristics	Credit the test with the appropriate LIS English text code	
	explanation of HMT (Specimen markedly hemolyzed)	
Other Considerations	Ensure that the samples are free of fibrin or other particulate matter. Samples need to be free of bubbles.	
	Note: Use of transfer pipettes affects accurate quantitation	
	of BNP.	

4. REAGENTS

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Refer to the Material Safety Data Sheet (MSDS) supplied with the reagents for complete safety hazards. Refer to the section in this procedure covering "SAFETY" for additional information.

4.1 Reagent Summary

Reagents / Kits	Supplier & Catalog Number
ADVIA Centaur BNP	Siemens reagent cartridge Cat. No. 02816138
ADVIA Centaur R1 Acid Reagent	Siemens reagent Cat. No. 00497043
ADVIA Centaur R2 Base Reagent	Siemens reagent Cat. No. 00497043
ADVIA Centaur Wash 1 Solution	Siemens reagent Cat. No. 01137199
ADVIA Centaur CSC	Siemens reagent Cat. No. 09908593

4.2 Reagent Preparation and Storage

NOTES: Date and initial all reagents upon opening. Each container must be labeled with (1) substance name, (2) lot number, (3) date of preparation, (4) expiration date, (5) initials of tech, (6) any special storage instructions; check for visible signs of degradation.

Refer to the Material Safety Data Sheet (MSDS) for a complete description of hazards. If a specific hazard is present, it will be noted in this procedure when the hazard is first encountered in a procedural step.

Wear protective clothing, gloves and eye/face protection.

NOTE: Sodium azide can react with copper and lead plumbing to form explosive metal azides.

Assay Kit: ADVIA Centaur BNP Ready Pack (primary reagent pack)		
Reagent a	Reagent a Lite Reagent (Volume 10.5 mL)	
Reagent b	ent b Solid Phase (Volume 21 mL)	
Manufacturer's Information		
Storage	Store the reagent up right at 2 - 8° C	

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Stability	Reagent is stable until expiration date stamped on the pack label.	
	Onboard reagents are stable for 41.6 days.	
Preparation	ration Mix all primary reagent packs by hand before loading them onto	
_	the system. Visually inspect the bottom of the reagent pack to	
	ensure that all particles are dispersed and resuspended.	

Reagent	ADVIA Centaur R1 Acid Reagent & R2 Base Reagent	
Container	Reagent bottle (300 mL)	
Storage	Store at 2 - 25° C.	
	Use at 18 - 30° C.	
Stability	Reagent is stable until expiration date stamped on the pack label.	
	Onboard reagents are stable for 30 days.	
	Avoid exposure to light.	
Preparation	This reagent is liquid and ready to use.	

Reagent	ADVIA Centaur Wash 1 Solution	
Container	Reagent bottle (1500 mL)	
Storage	Store at 2 - 25° C	
Stability	Reagent is stable until expiration date stamped on the pack label.	
	Onboard reagents are stable for 30 days.	
Preparation	This reagent is liquid and ready to use.	

Reagent	ADVIA Centaur Cleaning Solution Concentrate	
Container	Reagent bottle (70 mL)	
Storage	Store at 2 - 8° C	
Stability	Reagent is stable until expiration date stamped on the pack label.	
	Prepared reagent is stable for 7 days.	
Preparation	1. Carefully pour a container of ADVIA Centaur CP Cleaning	
	Solution Concentrate into the cleaning bottle.	
	2. Add enough reagent grade water to the bottle or container to	
	bring the total volume of cleaning solution to 2 liters.	

5. CALIBRATORS/STANDARDS

5.1 Calibrators/Standards Used

Calibrator	Supplier and Catalog Number
Low and High Calibrator	Siemens BNP calibrator, Cat. No. 02817266

5.2 Calibrator Preparation and Storage

NOTE: Date and initial all calibrators upon opening. Each container must be labeled with (1) substance name, (2) lot number, (3) date of preparation, (4) expiration date, (5) initials of tech (6) any special storage instructions; check for visible signs of degradation.

Calibrator	BNP Calibrator (Low & High)	
Preparation	Add 2.0 mL of reagent grade water into each calibrator vial.	
	• Let the calibrators stand for 15 to 20 minutes at room	
	temperature (20 - 30° C) to allow the lyophilized material to	
	dissolve.	
	Gently swirl and invert the vials until homogeneous.	
Storage/Stability	• Store at 2 - 8° C	
	• Unopened Calibrator is stable until the expiration date on	
	the vial.	
	• Opened Calibrator: once reconstituted use immediately and	
	freeze the rest. The frozen calibrator is stable for 60 days	
	when stored at \leq -20° C.	
	Freeze-thaw is recommended one time only after	
	reconstitution.	

5.3 Calibration Procedure

Criteria	Special Notations	
Frequency	When the calibration interval expires	
	Calibration Interval is 28 days	
	A calibration is invalid	
	New lot or shipment of assay reagents	
	Controls are repeatedly out of range.	

	Calibration Procedure	
1	From the main page, go to Result > Pending , and make sure nothing is pending	
1.	for this method.	
	Note: The instrument must be in a Ready mode before moving on to the next	
	step.	
2	Get the Centaur CP Calibrator Master Curve card from the calibrator pack and	
۷.	reagent Master Curve card from the reagent box. From the main page, go to	
	Definition > Calibrators > Scan, scan all 3 barcodes (on the Calibrator Master	
	Curve) from top to bottom. Then go to Definition > Master Curves > Scan ,	
	scan all barcodes (on the Reagent Master Curve) from top to bottom.	
	Notes:	
	 The calibrator pack and reagent box include both Centaur CP and XP 	
	master curves. Be sure to scan the correct master curve.	
	 Always scan the calibrator information first. 	

	Calibration Procedure	
3.	Load the low and high calibrators into appropriate sample pour-off tubes that accommodate the Siemens-supplied barcode label.	
	Note : The low and high calibrators provided in this kit are matched to the	
	original primary reagent pack. Do not mix calibrator lots with different lot of reagent packs.	
4	Attach the Siemens-supplied barcode labels to the pour off tubes.	
4.	Load the sample tubes into a sample rack. Move the tube type selector on the	
5.	rack to position A.	
6.	Load the rack in the sample compartment.	
7.	On the Sample Compartment screen, select the lane containing the sample rack with the calibration material.	
8.	Confirm or enter the calibrator information.	
9.	Select Close to return to the workspace.	
10.	At the workspace, select the primary reagent area.	
11.	Select the assay to calibrate.	
12.	Select Calibrate. The system automatically begins sampling the calibrator	
	material.	
	NOTE: The Calibrate button is not active on the Primary Reagent Screen in the following situations:	
	there are no calibrators defined	
	there are no Master Curves defined	
	there is no reagent onboard	
	the calibration material for defined lots is expired	
	there is no calibrator material in the sample compartment	
13.	Select Close to return to the workspace.	
14.	To check the time due for the calibration:	
1	a. At the workspace, select Results .	
	b. Select the Calibrations tab to view the Time Due stamp for the assay	
	you are calibrating. c. Select Close .	
	C. Select Close.	

5.4 Tolerance Limits

IF	THEN
If result fall within assay-specific specification,	proceed with analysis
and QC values are within acceptable limits,	
If result falls outside assay-specific specification,	troubleshoot the assay and/or
or QC values are out of Acceptable limits,	instrument and repeat calibration

6. QUALITY CONTROL

6.1 Controls Used

Controls	Supplier and Catalog Number
Liquichek TM Cardiac Markers	Bio-Rad Laboratories Cat. No. 181, 182 and 183
Plus Control levels 1, 2 and 3	

6.2 Control Preparation and Storage

NOTE: Date and initial all controls upon opening. Each container should be labeled with (1) substance name, (2) lot number, (3) date of preparation, (4) expiration date, (5) initials of tech, and (6) any special storage instructions; check for visible signs of degradation.

Control	Liquichek TM Cardiac Markers Plus Control levels 1, 2 and 3	
Preparation	 Allow the frozen control to thaw at room temperature (18-25°C) for 30 minutes or until completely thawed prior to use. Before sampling, gently swirl the vials several times to ensure homogeneity. After each use, promptly replace the stopper and return to 2 - 8°C storage. 	
Storage/Stability	 Store at -20 to -70° C Unopened Quality Control is stable until the expiration date on the vial. Opened Quality Control: is stable for 8 days when stored tightly capped at 2 - 8° C. 	

6.3 Frequency

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Analyze all 3 levels of QC material after each calibration.

QC is run daily as follows: Levels 1 and 3 are run on day shift, Level 2 on evening shift, and either Level 1 or 3 on night shift.

6.4 Tolerance Limits

Step	Action
1	Acceptable ranges for QC are programmed into the instrument's Quality Control software system and Unity Real Time, and may be posted near the instrument for use during computer downtime.
2	Run Rejection Criteria
	Anytime the established parameters are exceeded (if one QC result exceeds)
	2 SD), the run is considered out of control (failed) and patient results must
	not be reported.

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Step	Action				
	• The technologist must follow the procedure in the Laboratory QC Program to resolve the problem.				
3	Corrective Action:All rejected runs must be effectively addressed through corrective action.				
	Steps taken in response to QC failures must be documented. Patient samples in failed analytical runs must be reanalyzed according to the Laboratory QC Program. Supervisors may override rejection of partial or complete runs only with detailed documentation and criteria for overrides that are approved by the Medical Director. Consult corrective action guidelines in Laboratory QC Program. Follow corrective action guidelines in the Laboratory QC Program.				
	Corrective action documentation must follow the Laboratory Quality Control Program.				
4	Review of QC				
	QC must be reviewed weekly by the Group Lead or designee and monthly by the Supervisor/Manager or designee.				
	• If the SD and/or CV are greater than established ranges, investigate the cause for the imprecision and document implementation of corrective actions.				

IF the Quality Control	THEN
does not fall within the Expected Values	 Verify that the materials are not expired. Verify that required maintenance was performed. Verify that the assay was performed according to the instructions for use. Rerun the assay with fresh quality control samples. If necessary recalibrate the assay and repeat quality control If unable to resolve issue and/or instrument is inoperable, testing may be performed on alternative method B-type Natriuretic Peptide (BNP) by Triage Meter. Refer to one of the appropriate SOPs: WAH.H11 or SGAH.H11 for instructions.

6.5 Review Patient Data

Each result is reviewed for error messages. Refer to the ADVIA Centaur CP system manual "Error messages" section for troubleshooting. Resolve any problems noted before issuing patient reports.

6.6 **Documentation**

- QC tolerance limits are programmed into the instrument and Unity Real Time; it calculates cumulative mean, SD and CV and stores all information for easy retrieval.
- Quality control records are reviewed daily at the bench, weekly by the Group Lead or designee, and monthly by the Supervisor/Manager or designee.
- Refer to complete policies and procedures for OC documentation and for record retention requirements in the Laboratory QC Program.

6.7 **Quality Assurance Program**

- Each new lot number of reagent or new shipment of the same lot of reagent must be tested with external control materials and previously analyzed samples. Performance of the new lot must be equivalent to the previous lot; utilize published TEA for acceptability criteria.
- Training must be successfully completed and documented prior to performing this test. This procedure must be incorporated into the departmental competency assessment program.
- The laboratory participates in CAP proficiency testing. All proficiency testing materials must be treated in the same manner as patient samples.
- Monthly QC must be presented to the Medical Director or designee for review and signature.
- Monthly QC mean and SD are sent to Bio-Rad Laboratories for peer group comparison.
- Consult the Laboratory QC Program for complete details.

7. **EQUIPMENT and SUPPLIES**

7.1 **Assay Platform**

ADVIA Centaur CP Immunoassay system

7.2 **Equipment**

- Refrigerator capable of sustaining 2–8°C.
- Freezer capable of sustaining range not to exceed -20 to -70°C.
- Centrifuge

7.3 **Supplies**

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- Purified water (Millipore® or equivalent)
- Calibrated pipettes and disposable tips
- Cuvettes
- **Tips**

8. PROCEDURE

NOTE: For all procedures involving specimens, buttoned lab coats, gloves, and face protection are required minimum personal protective equipment. Report all accidents to your supervisor.

The package insert for a new lot of kits must be reviewed for any changes before the kit is used. A current Package Insert is included as a Related Document.

8.1	Loading samples into Sample Rack				
1.	Position the barcode label vertically on the sample tube approximately 2 cm (0.8 in)				
	from the top.				
2.	Move the tube-type selector on the rack to position B for short and C for long sample				
	tubes.				
3.	Place the sample tubes in the rack.				
4.	Ensure that there is only one type of sample tube in the rack and that the tube-type				
	selector is positioned correctly for that tube type. Ensure that the barcode labels are				
	clearly visible above or between the slots in the rack.				

8.2	Loading Sample Racks into the System
1.	Open the sample compartment door.
2.	Slide the sample rack into the appropriate lane. Use one continuous motion. The sample barcodes are read as the rack is inserted into the system. If the rack stops, or reverses, during its insertion, the barcodes may not be read.
3.	Ensure that the sample rack is inserted correctly, and locked into place. When the sample rack is inserted correctly, you will hear and feel it click into place.
4.	Close the sample compartment door.

8.3	Scheduling Samples through the Sample Compartment Screen				
1.	At the workspace, select the sample compartment. Select the Sample Rack. Select a				
	sample				
2.	Select the sample type by toggling the sample selection button. The default is a routine				
	patient sample (smp). If you want the sample to be processed before routine samples,				
	select stat.				
3.	Select the Sample ID field. The samples are numbered 1-12. Number 1 is the sample at				
	the back of the sample compartment, and number 12 is the sample at the front of the				
	sample compartment.				
4.	If the sample ID was not entered using a barcode label on the sample tube, enter the				
	sample ID and then press Enter .				
5.	Select the assays or the profiles to process against the sample.				
6.	Select Close.				

9. CALCULATIONS

The instrument automatically calculates the concentration of BNP in pg/mL.

10. REPORTING RESULTS AND REPEAT CRITERIA

10.1 Interpretation of Data

None required

10.2 Rounding

No rounding is necessary. Instrument reports results in whole numbers.

10.3 Units of Measure

pg/mL

10.4 Clinically Reportable Range (CRR)

5 - 5,000 pg/mL

10.5 Repeat Criteria and Resulting

IF the result is	THEN
< 5 pg/mL	Assure there is sufficient sample devoid of bubbles, cellular debris, and/or fibrin clots. Report as: < 5 pg/mL
≥ 5000 pg/mL	Report as $\geq 5000 \text{ pg/mL}$

To manually enter results in the LIS, use worksheet code SCH1 (at SGAH) or WHE1 (at WAH) with the Centaur default method code CS1 (at SGAH) or CW1 (at WAH).

11. EXPECTED VALUES

11.1 Reference Ranges

0-100 pg/mL

11.2 Critical Values

None established

11.3 Priority 3 Limit(s)

None established

12. CLINICAL SIGNIFICANCE

This assay is indicated for the measurement of plasma BNP as an aid in the diagnosis and assessment of the severity of heart failure. In patients with acute coronary syndromes (ACS), this test, in conjunction with other known risk factors, can also be used to predict survival as well as to predict the likelihood of future heart failure.

Heart failure is an important clinical syndrome which compromises left ventricular systolic or diastolic function or a combination of both. Heart failure occurs when the heart is unable to pump blood at a rate sufficient for metabolic requirements. Its most common causes are coronary artery disease, hypertension, valvular heart diseases and cardiomyopathies. Accurate and early diagnosis is important since effective therapeutic interventions (e.g., angiotensin converting enzyme inhibitors, beta-blockers) are available, which improve both morbidity and mortality. Based on clinical signs and symptoms, the severity of heart failure is classified into four classes of increasing disease progression according to the New York Heart Association classification.

13. PROCEDURE NOTES

FDA Status: FDA Approved/Cleared
 Validated Test Modifications: None

The instrument reporting system contains error messages to warn the operator of specific malfunctions. Any report containing such error messages should be held for follow-up. Refer to the ADVIA Centaur CP Operator's Guide.

14. LIMITATIONS OF METHOD

14.1 Analytical Measurement Range (AMR)

2 - 5000 pg/mL

14.2 Precision

Six samples were assayed 4 times, in 20 runs, on 2 systems over a period of 20 days. The following results were obtained:

Mean pg/mL	Within-Run % CV	Run-to-Run % CV	Total CV %
43	2.7	3.3	4.2
455	2.2	3.3	3.9
1771	1.9	2.9	3.5

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14.3 **Interfering Substances**

Heterophilic antibodies in human serum can react with reagent immunoglobulins, interfering with in vitro immunoassays. Patients routinely exposed to animals or to animal serum products can be prone to this interference and anomalous values may be observed. Additional information may be required for diagnosis.

Specimens that are	Demonstrate ≤ 10 % change in results up to	
Lipemic	800 mg/dL of triglycerides	
Lipeniic	1000 mg/dL of cholesterol	
Uremic	200 mg/dL of urea	
Ofeniic	2.5 mg/dL of creatinine	
Icteric	25 mg/mL of unconjugated bilirubin	
Hemolyzed 100 mg/dL of hemoglobin		

Clinical Sensitivity/Specificity/Predictive Values 14.4

N/A

15. SAFETY

The employee has direct responsibility to avoid injury and illness at work. Nearly all harmful exposures to infectious substances and chemicals, and other injuries, can be avoided with effective training and consistent safe work practices.

Become familiar with the Environmental Health and Safety (EHS) Manual to learn the requirements on working safely and protecting the environment from harm. Although lab work typically focuses on the hazards of working with specimens and chemicals, we must also control other important hazards.

- Slips, trips, and falls cause many serious injuries. Please ensure that spills are cleaned quickly (to avoid slippery floors) and that you can see and avoid obstacles in your path.
- Ergonomic injuries result from performing tasks with too much repetition, force, or awkward position. Ergonomic injuries include strains and back injuries. Learn about ergonomic hazards and how to prevent this type of injury.
- Scratches, lacerations, and needlesticks can result in serious health consequences. Attempt to find ways to eliminate your risk when working with sharp materials.

Report all accidents and injuries immediately to your supervisor or the business unit Environmental Health and Safety Manager or Specialist.

Notes:

The liquid waste container must be emptied once per shift. **Do NOT** transfer liquid waste into any other containers. Empty liquid waste directly from the container into the sink.

- When filling the DI water container; do NOT leave the container unattended while it is being filled. To avoid accidents, technologists MUST be present the entire time the container is being filled.
- If an accident occurs and biohazard waste, DI water or any other liquid spills on the floor, immediately notify the supervisor and all staff of the situation. Warn others to stay away from the accident area. Do **NOT** leave the site of the spill. Remain there to warn others not to walk on the wet floor and to prevent falls. Ask a colleague to get the Wet Floor Sign and some paper towels. Then immediately call the Environmental Services for help with clean up.

RELATED DOCUMENTS 16.

- 1. ADVIA Centaur CP Operator's Manual
- 2. Laboratory Quality Control Program
- 3. OC Schedule for ADVIA Centaur CP
- 4. Laboratory Safety Manual
- 5. Material Safety Data Sheets (MSDS)
- 6. Quest Diagnostics Records Management Procedure
- 7. Centrifuge Use, Maintenance and Functions Checks (Lab policy)
- 8. Hemolysis, Icteria and Lipemia Interference (Lab policy)
- 9. Repeat Testing Requirement (Lab policy)
- 10. ADVIA Centaur CP Sample Processing, Startup and Maintenance (Chemistry SOP)
- 11. Current Allowable Total Error Specifications at http://questnet1.qdx.com/Business_Groups/Medical/qc/docs/qc_bpt_tea.xls
- 12. Current package insert BNP Reagent Cartridge

17. REFERENCES

- 1. LiquichekTM Cardiac Markers Plus Control, Bio-Rad Laboratories revised 08/2014
- 2. Package Insert, BNP Calibrator, Siemens Diagnostics revised 09/2014
- 3. Package Insert, BNP reagent pack, Siemens Diagnostics revised 06/2015

18. **REVISION HISTORY**

Version	Date	Section	Reason	Reviser	Approval
000	6/1/12	3.2	Remove centrifugation requirement	J.Buss	J.Buss, RSL
000	6/1/12	4.1, 4.2	Remove Multi-Diluent 1 (not used)	J.Buss	J.Buss, RSL
000	6/1/12	10.4	Edit CRR at Medical Director request	J.Buss	J.Buss, RSL
000	6/1/12	10.5	Match CRR; No dilutions performed. Add LIS worksheet & method codes	J.Buss	J.Buss, RSL
000	6/1/12	14.1	Edit lower AMR	J.Buss	J.Buss, RSL
001	6/20/13		Update owner	L Barrett	R SanLuis
001	6/20/13	5.2	Remove open storage at frozen temp	AChini	R SanLuis
001	6/20/13	5.3	Shorten calibrator interval to 28 days	AChini	R SanLuis

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001	6/20/13	6.4	Removed GEC SOP as alternate method	AChini	R SanLuis
001	6/20/13	14.3	Revise % change and add hemolyzed	AChini	R SanLuis
001	6/20/13	15	Added specific safety notes	AChini	R SanLuis
001	6/20/13	16	Added Centaur operation SOP	L Barrett	R SanLuis
002	4/10/15	4.1	Update catalog numbers	A Chini	R SanLuis
002	4/10/15	6.2	Change open storage to 8 days	A Chini	R SanLuis
002	4/10/15	6.4, 6.6	Replace LIS with Unity Real Time	A Chini	R SanLuis
002	4/10/15	14.1	Change lower limit of AMR to match PI	A Chini	R SanLuis
002	4/10/15	14.2	Change data to match update PI	A Chini	R SanLuis
002	4/10/15	Footer	Version # leading zero's dropped due to new EDCS in use as of 10/7/13	L Barrett	R SanLuis
3	7/7/15	6.3	Change frequency to daily to match log	L Barrett	R SanLuis
4	3/15/16	1	Update local code	A Chini	R SanLuis
4	3/15/16	3.2	Change room temp. stability to 4 hours, add note for transfer pipettes	A Chini	R SanLuis
4	3/15/16	4.2	Add hazard information	A Chini	R SanLuis
4	3/15/16	5.3	Update steps 1 - 3	A Chini	R SanLuis

19. ADDENDA

None