TRAINING UPDATE

Lab Location:SGMC & WAHDepartment:Core Lab

Date Distributed: 4/11/2018
Due Date: 5/1/2018
Implementation: TBA

DESCRIPTION OF PROCEDURE REVISION

Name of procedure:

Intact Parathyroid Hormone (iPTH) by ADVIA Centaur CP SGAH.C74 v7

This has been converted to system SOP

Description of change(s):

Note: significant changes are related to change in reagent, other changes are mostly format updates

Section	Reason	
Header	Add WAH	
2	Modified to match new package insert	
3.2	Changed R.T. stability to 25 hours and refrigerated stability to 14 days	
4,5,6	Remove individual section labeling instructions and add general one	
4.1	Added new reagent catalog number	
5.2	Updated calibrator stability	
5.3	Updated calibration frequency	
7.2	Changed freezer range to match practice	
10.4	Changed CRR upper limit	
10.5	Review data moved from section 6	
10.6	Changed upper value and action	
11.1	Updated reference range to match pkg insert	
14.1	Changed AMR upper limit	
14.2,14.3	Modified data to match pkg insert	
15	Updated to new standard wording	
17	Added new reagent insert, update QC	

Implementation date for this revised SOP will be announced. (to be coordinated with LIS changes and receipt of reagent)

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

Electronic Document Control System



Document No.: SGAH.C74[7]

Title: Intact Parathyroid Hormone (iPTH) by ADVIA Centaur CP

Owner: LESLIE BARRETT
Status PRERELEASED

Effective Date: Next Review Date:

Review

REVIEW: DEFAULT DOCUMENT

ApproverStatusSign-off DateNICOLAS CACCIABEVEAPPROVED3/5/18 2:39 pm

ROBERT A SANLUIS APPROVED 3/5/18 12:24 pm

LESLIE BARRETT APPROVED 3/2/18 12:17 pm

Technical SOP

Title	Intact Parathyroid Hormone (iPT)	H) by ADVI	A Centaur CP
Prepared by	Ashkan Chini	Date:	5/1/2012
Owner	Robert SanLuis	Date:	11/9/2012

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
Intact Parathyroid Hormone	ADVIA Centaur CP	IOIPTH, ITPTH

Synonyms/Abbreviations	
iPTH, Intraoperative IPTH	

Department	
Chemistry	

Form revised 2/02/200

2. ANALYTICAL PRINCIPLE

The ADVIA Centaur PTH assay is a two-site sandwich immunoassay using direct chemiluminometric technology, which uses constant amounts of two anti-human PTH antibodies. The first antibody in the Lite Reagent is a monoclonal mouse anti-human PTH (N-terminal) antibody labeled with acridinium ester. The second antibody is a biotinylated monoclonal mouse anti-human PTH (C-terminal) antibody that is bound to streptavidincoated paramagnetic latex particles in the Solid Phase.

3. SPECIMEN REQUIREMENTS

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

3.2 Specimen Type & Handling

Criteria		
Type -Preferred	Plasma (K ₂ EDTA)	
-Other Acceptable	None	
Collection Container	Lavender Top Tube	
Volume - Optimum	1 mL	
- Minimum	0.5 mL	
Transport Container and	Collection container or plastic vial at room temperature	
Temperature		
Stability & Storage	Room Temperature: 25 hours	
Requirements	Refrigerated: 2-8° C 14 days	
	Frozen: Not recommended	
Timing Considerations	Correct handling of patient samples is critical to ensure the	
	integrity of the intact PTH molecule. Intact PTH has been	
demonstrated to be labile and is susceptible to		abile and is susceptible to
	fragmentation.	-
	This instability depe	nds on both time and temperature.

form revised 2/02/200

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Criteria	
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; V	
collection-UNAC. Document the request for recolle	
	the LIS.
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	Keep tubes stoppered at all times.

NOTE: Labeling requirements for all reagents, calibrators and controls include: (1) Open date, (2) Substance name, (3) Lot number, (4) Date of preparation, (5) Expiration date, (6) Initials of tech, and (7) Any special storage instructions. Check all for visible signs of degradation.

4. REAGENTS

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.

4.1 Reagent Summary

Reagents / Kits	Supplier & Catalog Number
ADVIA Centaur PTH Ready Pack	Siemens reagent cartridge Cat. No. 10699154
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

Assay Kit: ADVIA Centaur PTH Ready Pack (primary reagent pack)			
Storage	Store the reagent upright at 2-8°C		
	Protect unopened reagent packs from all heat and light sources		
Stability	Stable until expiration date stamped on the pack label.		
	Onboard reagents are stable for 28 days.		
Preparation	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.		

revised 2/02/2007

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Site:	Snauv	Grove	Medical	Center.	Washington	Adventist	HOSDIIA	ı

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	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	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 (CSC)		
Container	Reagent bottle (70 mL)		
Storage	Store at 2-8°C		
Stability	Stable until expiration date stamped on the pack label.		
	Prepared reagent is stable for 7 days.		
Preparation	 Carefully pour a container of ADVIA Centaur CP Cleaning Solution Concentrate into the cleaning bottle. 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
ADVIA Centaur PTH	Each reagent pack includes a calibration set
Calibrator	

5.2 Calibrator Preparation and Storage

Calibrator	ADVIA Centaur PTH Calibrator	
Preparation	Add 1.0 mL of reagent grade water to each calibrator vial.	
	• Let stand for 30 minutes at room temperature (18-25°C) to	
	allow the lyophilized material to dissolve.	
	Gently mix the calibrators before using.	

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Storage/Stability	•	Store at 2-8°C
	•	Unopened: until the expiration date on the vial.
	•	Reconstituted: stable for 8 hours at 18-25°C.
	•	Reconstituted (frozen): stable for 60 days at -20° C or
		colder immediately after reconstitution.

5.3 Calibration Procedure

Criteria	Special Notations
Frequency	Calibration Interval/Stability is 21 days
• •	Prior to patient testing when the calibration interval has
	expired
	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
4.	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.
3.	Load the low and high calibrators into appropriate sample pour-off tubes that
٥.	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.
5.	Load the sample tubes into a sample rack. Move the tube type selector on the
	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.

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	Calibration Procedure			
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:			
17,	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.			

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 Specialty Immunoassay	Bio-Rad Laboratories Cat. No. 364, 365, 366
Control Levels 1, 2 and 3	

6.2 Control Preparation and Storage

Control	Liquichek Specialty Immunoassay Control Levels 1, 2 and 3
Preparation	 Allow the frozen control to stand at room temperature (18 - 25°C) until it is completely thawed. Before sampling, gently swirl the vial several times to ensure homogeneity. Promptly replace the stopper and return to 2-8° C storage after each use.

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Storage/Stability	•	Store at ≤ -20° C
	•	Unopened QC: stable until expiration date on the vial.
	•	Opened QC: Once thawed and opened, stable for 7 days
		when stored tightly capped at 2-8°C.

6.3 Frequency

Analyze all 3 Levels of QC material after each calibration.

SGMC: 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.

WAH: PTH testing is only performed when a Parathyroid Surgery is scheduled. Prior to scheduled surgery, check calibration interval/stability, perform calibration if required (see section 5.3), and run all QC levels for PTH to ensure instrument and method are functioning properly. When PTH is in use, QC must be run once per shift.

6.4 Tolerance Limits and Criteria for Acceptable QC

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. 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.

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Step	ep Action	
	If the SD and/or CV are greater than established ranges, investigate the cause for the imprecision and document implementation of	

IF the Quality Control	THEN
does not fall within the	Verify that the materials are not expired.
Expected Values	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

6.5 **Documentation**

Site: Shady Grove Medical Center, Washington Adventist Hospital

corrective actions.

- 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 QC documentation and for record retention requirements in the Laboratory QC Program.

6.6 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

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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 -50°C.
- Centrifuge

7.3 Supplies

- 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.

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		

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8.3	Scheduling Samples through the Sample Compartment Screen
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.

NOTE: In the event that the test system becomes inoperable, notify supervision or designee for further direction. Patient specimens must be stored in a manner that maintains the integrity of the specimen.

9. **CALCULATIONS**

The instrument automatically calculates the concentration of PTH 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 up to one decimal point.

Units of Measure 10.3

pg/mL

10.4 Clinically Reportable Range (CRR)

 $6.3 - \frac{2,000.0 \text{ pg/mL}}{1.000 \text{ pg/mL}}$

10.5 **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.

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Site: Shady Grove Medical Center, Washington Adventist Hospital 10.6 Repeat Criteria and Resulting

IF the result is	THEN	
	Assure there is sufficient sample devoid of bubbles, cellular	
< 6.3 pg/mL	debris, and/or fibrin clots. Report as: < 6.3 pg/mL	
≥2,000.0 pg/mL	Report as $\geq 2000.0 \text{ pg/mL}$	

11. EXPECTED VALUES

11.1 Reference Ranges

 $18.4 - 80.1 \, \text{pg/mL}$

11.2 Critical Values

None established

11.3 Standard Required Messages

None established

12. CLINICAL SIGNIFICANCE

This assay is intended to be used to aid in the differential diagnosis of hyperparathyroidism, hypoparathyroidism, or hypercalcemia of malignancy.

Parathyroid hormone (PTH), produced by the parathyroid gland, is the major circulating factor regulating extracellular calcium concentration. Abnormally low-ionized calcium concentrations trigger the secretion of PTH. The PTH molecules bind to type 1 parathyroid hormone receptors in target tissues and initiate a sequence of reactions resulting in increased extracellular calcium concentrations. PTH stimulates osteoclastic bone resorption resulting in the release of calcium from bone. PTH stimulates transcellular calcium reabsorption from the renal tubules and stimulates the kidney to produce 1,25-dihydroxyvitamin D which acts on the intestines to increase calcium reabsorption. In most clinical conditions, rising levels of extracellular calcium suppresses PTH secretion through a negative feedback mechanism.

Parathyroid hormone increases the rate of bone metabolism. Depending on the age of the patient, the bones involved, and the concentrations of the hormone in circulation over time, the effect on the bone can be either catabolic or anabolic. Consistently high concentrations of parathyroid hormone generally have a catabolic effect and intermittent, slightly elevated concentrations have an anabolic effect.

13. PROCEDURE NOTES

FDA Status: FDA Approved/ClearedValidated Test Modifications: None

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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 your ADVIA Centaur CP Operator's Guide.

14. LIMITATIONS OF METHOD

14.1 Analytical Measurement Range (AMR)

 $6.3 - \frac{2,000.0}{pg/mL}$

Site: Shady Grove Medical Center, Washington Adventist Hospital

14.2 Precision

Three samples were assayed 12 times, in each of 12 runs, on 3 systems over a period of 4 days. The following results were obtained:

Mean pg/mL	Within-Run % CV	Total CV %
13.1	4.02	7.9
415.6	2.86	4.13
1113.2	2.31	3.96

14.3 Interfering Substances

Interferent	Highest Concentration	Observed Interference %	
	Tested		
Bilirubin (Conjugated)	60 mg/dL	5.9	
Bilirubin (Unconjugated)	60 mg/dL	-2.2	
Hemoglobin	500 mg/dL	-4.5	
Triglycerides	3275 mg/dL	-0.4	

14.4 Clinical Sensitivity/Specificity/Predictive Values

None

15. SAFETY

Refer to your local and corporate safety manuals and Safety Data Sheet (SDS) for detailed information on safety practices and procedures and a complete description of hazards.

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 <u>MUST</u> 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

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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.

16. RELATED DOCUMENTS

- 1. ADVIA Centaur CP Operator's Manual
- 2. Laboratory Quality Control Program
- 3. OC Schedule for ADVIA Centaur CP
- 4. Laboratory Safety Manual
- 5. Safety Data Sheets (SDS)
- 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.gdx.com/Business Groups/Medical/gc/docs/gc bpt tea.xls
- 12. Current package insert Intact PTH Reagent Cartridge

17. REFERENCES

- 1. LiquichekTM Specialty Immunoassay Control, Bio-Rad Laboratories revised 04/2016
- 2. Package Insert, Intact PTH reagent pack, Siemens Diagnostics revised 07/2017

18. REVISION HISTORY

Version	Date	Section	Reason	Reviser	Approval
000	11/9/12		Update owner	L Barrett	R SanLuis
000	11/9/12	3.2	Remove centrifugation requirement	L Barrett	R SanLuis
001	6/20/13	3.2	Add frozen storage	A Chini	R SanLuis
001	6/20/13	4	Remove Multi-Diluent 1 (not used)	A Chini	R SanLuis
001	6/20/13	5.2	Remove open storage at frozen temp	A Chini	R SanLuis
001	6/20/13	10.4	Revised upper CRR	A Chini	R SanLuis
001	6/20/13	10.5	Removed onboard dilution	A Chini	R SanLuis
001	6/20/13	14.3	Updated Interfering Substances	A Chini	R SanLuis
001	6/20/13	15	Added specific safety notes	A Chini	R SanLuis
001	6/20/13	16	Added Centaur operation SOP	L Barrett	R SanLuis
002	4/15/15	1	Add new test code	L Barrett	R SanLuis
002	4/15/15	3.2	Add statement to keep tubes capped	A Chini	R SanLuis
002	4/15/15	4.1, 5.1	Update catalog numbers	A Chini	R SanLuis

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Version	Date	Section	Reason	Reviser	Approval
002	4/15/15	6.3	Change QC frequency	A Chini	R SanLuis
002	4/15/15	6.4, 6.6	Replace LIS with Unity Real Time	A Chini	R SanLuis
002	4/15/15	10.4,10.5 14.1	Change lower limit of AMR & CRR to match updated package insert (PI)	A Chini	R SanLuis
002	4/15/15	14	Change data to match updated PI	A Chini	R SanLuis
002	4/15/15	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	1	Correct test code from INPTH to ITPTH	L Barrett	R SanLuis
3	7/7/15	6.3	Change frequency to daily to match log	L Barrett	R SanLuis
4	3/22/16	4.2	Add hazard information	A Chini	R SanLuis
4	3/22/16	5.3	Update steps 1 - 3	A Chini	R SanLuis
4	3/22/16	6.2	Change open control from 23 days to 7	A Chini	R SanLuis
4	3/22/16	17	Update package inserts	A Chini	R SanLuis
5	6/16/16	5.3	Specify calibration when interval expires	A Chini	R SanLuis
5	6/16/16	6.3	Update QC frequency for WAH	A Chini	R SanLuis
6		Header	Add WAH	L Barrett	R SanLuis
6	2/26/18	2	Modified to match new package insert	A Chini	R SanLuis
6	2/26/18	3.2	Changed R.T. stability to 25 hours and refrigerated stability to 14 days	A Chini	R SanLuis
6	2/26/18	4,5,6	Remove individual section labeling instructions and add general one	L Barrett	R SanLuis
6	2/26/18	4.1	Added new reagent catalog number	A Chini	R SanLuis
6	2/26/18	5.2	Updated calibrator stability	A Chini	R SanLuis
6	2/26/18	5.3	Updated calibration frequency	A Chini	R SanLuis
6	2/26/18	7.2	Changed freezer range to match practice	L Barrett	R SanLuis
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6	2/26/18	11.1	Updated range to match pkg insert	A Chini	R SanLuis
6	2/26/18	14.1	Changed upper limit	A Chini	R SanLuis
6	2/26/18	14.2,14.3	Modified data to match pkg insert	A Chini	R SanLuis
6	2/26/18	15	Updated to new standard wording	L Barrett	R SanLuis
6	2/26/18	17	Added new reagent insert, update QC	A Chini	R SanLuis

19. ADDENDA

None

TCA1200 7/ 07/700/

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