

TRAINING UPDATE

Lab Location: SGMC & WAH
Department: Core Lab

Date Distributed: 7/29/2019
Due Date: 8/28/2019
Implementation: 8/19/2019

DESCRIPTION OF PROCEDURE REVISION

Name of procedure:	
Procalcitonin Test by Biomerieux Vidas 3 SGAH.C975 v1	
Description of change(s):	
<i>One major change to SOP:</i>	
Section	Reason
14.1	Corrected upper AMR value
<p style="text-align: center;">This revised SOP will be implemented on August 19, 2019</p>	

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

Technical SOP

Title	Procalcitonin Test by Biomerieux Vidas 3	
Prepared by	Julie Negado and Zanetta Morrow	Date: 8/28/2017
Owner	Robert SanLuis	Date: 8/28/2017

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

Review		
Print Name	Signature	Date

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1. TEST INFORMATION

Assay	Method/Instrument	Local Code
Procalcitonin	Enzyme-Linked Fluorescent Assay / Vidas 3	PCT

Synonyms/Abbreviations
Procalcitonin, PCT

Department
Chemistry

Form revised 2/02/2007

2. ANALYTICAL PRINCIPLE

The assay principle combines a one-step immunoassay sandwich method with a final fluorescent detection (ELFA).

The Solid Phase Receptacle (SPR) serves as the solid phase as well as the pipetting device. Reagents for the assay are ready-to-use and pre-dispensed in the sealed reagent strips.

All of the assay steps are performed automatically by the instrument. The sample is transferred into the wells containing anti-procalcitonin antibodies labeled with alkaline phosphatase (conjugate). The sample/conjugate mixture is cycled in and out of the SPR several times. This operation enables the antigen to bind with the immunoglobulins fixed to the interior wall of the SPR and the conjugate to form a sandwich. Unbound compounds are eliminated during wash steps.

Two detection steps are performed successively. During each step, the substrate (4-Methyl-umbelliferyl phosphate) is cycled in and out of the SPR. The conjugate enzyme catalyzes the hydrolysis of this substrate into a fluorescent product (4-Methyl-umbelliferone) the fluorescence of which is measured at 450 nm. The intensity of the fluorescence is proportional to the concentration of antigen present in the sample.

At the end of the assay, results are automatically calculated by the instrument in relation to two calibration curves corresponding to the two detection steps. A fluorescence threshold value determines the calibration curve to be used for each sample. The results are then printed out.

3. SPECIMEN REQUIREMENTS

3.1 Patient Preparation

Not applicable

3.2 Specimen Type & Handling

Criteria	
Type	-Preferred -Other Acceptable
Collection Container	Plasma (Lithium Heparin) N/A
Volume	Mint green top tube (PST)
Transport Container and Temperature	- Optimum - Minimum
Stability & Storage Requirements	1.0 mL 0.5 ml
	Collection container at room temperature
	Room Temperature: 8 hours
	Refrigerated: 48 hours
	Frozen: 6 months, do not exceed three (3) freeze/thaw cycles

Criteria	
Timing Considerations	Specimen should be tested as soon as possible.
Unacceptable Specimens & Actions to Take	Specimens that are unlabeled improperly labeled, or those 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.
Compromising Physical Characteristics	Hemolyzed, lipemic and icteric samples reject sample and request a recollection. Credit the test with the appropriate LIS English text code.
Other Considerations	None

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	Supplier & Catalog Number
Vidas B.R.A.H.M.S PCT Kit (include PCT Reagent Strips, SPRs, Calibrators and Controls)	BIOMERIEUX Ref. # 30-450-01
NERL Reagent Grade Water	Thermo Scientific NERL® Reagent Grade Water Ref.#9800-3

4.2 Reagent Preparation and Storage

Reagent	PCT Reagent Strips, PCT SPRs
Storage	2-8°C
Stability	Stable until kit expiration date
Preparation	Ready to use

Reagent	NERL Reagent Grade Water
Storage	Store at room temperature.
Stability	Stable for 30 days after opening.
Preparation	None

Form revised 2/02/2007

5. CALIBRATORS/STANDARDS

5.1 Calibrators/Standards Used

Calibrator	Supplier and Catalog Number
PCT Calibrators (S1 and S2) (included in the PCT Kit)	BIOMERIEUX Ref. # 30-450-01

5.2 Calibrator Preparation and Storage

Reagent	PCT Calibrators (S1 and S2)
Storage	Store at 2-8°C
Stability	Once reconstituted, the calibrators are stable for 8 hours at 2-8°C, or until expiration date on the kit at -25+/- 6°C. (Freeze immediately after reconstitution preferably in aliquots of 200 µl) Five (5) freeze and thaw cycles are possible.
Preparation	Reconstitute with 2 mL distilled water. Let stand for 5-10 minutes then mix.

5.3 Calibration Criteria and Procedure

Criteria	Special Notations
Frequency	Performed each time a new lot of reagent is opened, after the master lot data (MLE) has been entered and then every 28 days.
Tolerance Limits	The calibration values must be within the set RFV (Relative Fluorescence Value). If this is not the case, recalibrate using S1 and S2)
Procedure	<ul style="list-style-type: none"> • Calibration is performed by Testing Personnel • Remove the required reagents from the refrigerator. • Use one "PCT" strip and one "PCT" SPR for each calibrator to be tested. Ensure the storage pouch has been carefully resealed after the required SPRs have been removed. • The calibrators must be identified by "S1" and by "S2" and tested in duplicate. • Mix the calibrators using a vortex-type mixer after reconstitution. • Follow steps for Test Run in section 8.3. • At the completion of the calibration, results are analyzed automatically by the computer using two calibration curves. The calibration values must be within the set RFV (Relative Fluorescence Value). If this is not the case, recalibrate using S1 and S2.
Dilutions	N/A

6. QUALITY CONTROL

6.1 Controls Used

Controls	Supplier and Catalog Number
Vidas B.R.A.H.M.S PCT Controls C1 and C2 (included in the PCT Kit)	BIOMERIEUX Ref. # 30-450-01
Lyphocheck Specialty Immunoassay Controls L1 and L2	Bio-Rad Laboratories Ref.#2714 and 27125

6.2 Control Preparation and Storage

Reagent	PCT Controls (C1 and C2)
Storage	Store at 2-8°C
Stability	Once reconstituted, the controls are stable for 8 hours at 2-8°C, or until expiration date on the kit at -25+/- 6°C. (Freeze immediately after reconstitution preferably in aliquots of 200 µl) Five (5) freeze and thaw cycles are possible
Preparation	Reconstitute with 2 mL distilled water. Let stand for 5-10 minutes then mix with vortex

Control	Lyphocheck Specialty Immunoassay Controls L1 and L2
Storage	Store at 2-8°C
Stability	Unopened: until expiration date when stored at 2-8°C. Reconstituted and stored tightly capped at 2-8°C: stable for 3 days. Reconstituted and stored in tightly capped aliquot vials at -20 to -70°C: stable for 30 days. Use the content of each aliquot vial only once and discard the remainder.
Preparation	Reconstitute each vial with 2 mL of distilled or deionized water. Replace the stopper and allow this product to stand for approximately 15 minutes swirling occasionally. Before sampling, gently swirl the vials several times to ensure homogeneity.

6.3 Frequency

Vidas B.R.A.H.M.S PCT Controls C1 and C2 must be performed immediately after opening a new kit to ensure that the reagent performance has not been altered. Each calibration must also be checked using these controls.

Lyphocheck Specialty Immunoassay Controls L1 and L2 will be run after opening a new Vidas B.R.A.H.M.S PCT reagent kit, after a calibration and once per shift each day of patient testing.

To enter Lyphocheck Speciality Immunoassay Controls L1 and L2 QC results in Unity Real Time:

1. Log into Unity Real Time
2. Select the appropriate Lab site
 - a. WAH: "216442 WAH Centaur"
 - b. SGMC: "137244 SGAH Centaur"
3. Select Specialty Immunoassay
4. Control 1 results are entered as Level 1
5. Control 2 results are entered as Level 2
6. SAVE

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	<p>Run Rejection Criteria</p> <ul style="list-style-type: none"> • 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	<p>Corrective Action:</p> <ul style="list-style-type: none"> • All rejected runs must be effectively addressed through corrective action. Steps taken in response to QC failures must be documented appropriately in Bio Rad Unity. Patient samples in failed analytical runs must be <u>reanalyzed according to the Laboratory QC program</u>. 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 and follow corrective action guidelines in Laboratory QC Program.
4	<p>Review of QC</p> <ul style="list-style-type: none"> • 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.

6.5 Documentation

- QC tolerance limits are programmed into the instrument and Unity Real Time where the cumulative mean, SD, and CV are all calculated and stored 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 records retention requirements in the Laboratory QC Program.

6.6 Quality Assurance Program

- Each new lot of reagent or new shipment of the same lot of reagent must be tested with external QC 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.

7. EQUIPMENT and SUPPLIES

7.1 Assay Platform

VIDAS® B.R.A.H.M.S PCT™

7.2 Equipment

Biomerieux Vidas 3

7.3 Supplies

Pipettes to dispense 2 mL and 200uL

Pipette tips

PPE defined by lab

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	Maintenance
1.	Perform required maintenance. Refer to addendum for details
8.2	Specimen / Reagent Preparation
1.	Remove the required reagents from the refrigerator.
2.	Use one "PCT" strip and one "PCT" SPR® for each sample, control, or calibrator to be tested. Make sure the storage pouch has been carefully resealed after the required SPR®s has been removed.
8.3	Test Run
1.	Before pipetting, ensure that samples, calibrators and controls are free of bubbles.
2.	Mix the calibrators and controls with a vortex-type mixer in order to improve result reproducibility.
3.	Pipette 200µL of sample, calibrator or control into the sample well. (NOTE: the calibrators must be identified by "S1" and by "S2", and tested in duplicate. The controls, identified by C1 and C2, will be tested in singles.
4.	Insert the VIDAS SPRs and strips into the positions indicated on the screen. Verify that the color labels with the assay code on the SPRs and strips match.
5.	Initiate the assay processing as directed in the Operator's Manual. The instrument performs all the assay steps automatically. The assay will be completed in approximately 20 minutes.
6.	After the assay is completed, dispose of SPRs and strips into bio hazardous waste containers.
7.	Print the Report and manually enter results into Sunquest under function MEM.
8.4	Special Handling
1.	To load a barcoded sample, remove the appropriate rack completely from the VIDAS 3 instrument.
2.	Load the sample into the appropriate segment of the rack.
3.	Reinsert the rack horizontally into the instrument. VIDAS 3 will automatically read the barcodes and update the Sample/Reagent Loading Plan.
4.	Load strips and SPR's according to the loading plan
5.	Ensure the disposables are available and select Start to begin analysis

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 Procalcitonin in ng/mL.

10. REPORTING RESULTS AND REPEAT CRITERIA**10.1 Interpretation of Data**

N/A

10.2 Rounding

No rounding necessary. Instrument reports results with two decimal points.

10.3 Units of Measure

ng/mL

10.4 Clinically Reportable Range (CRR)

0.05 – 2000.00 ng/mL

10.5 Repeat Criteria and Resulting

Samples with procalcitonin concentrations greater than 200 ng/mL should be retested after dilution by 1/10 (1 volume of sample + 9 volumes of PCT negative sample or Serum free reagent (Ref. 66 581). If the dilution factor has not been entered when the analysis has been requested (see Operator's Manual), multiply the result by the dilution factor to obtain the sample concentration.

IF the result is ...	THEN...
< 0.05 ng/mL	Assure there is sufficient sample devoid of cellular debris, and/or fibrin clots. Report as: "< 0.05 ng/mL"
>200 ng/mL	Manually dilute the sample using dilution factor of 10. [1 volume of sample + 9 volumes of PCT negative sample (<0.5ng/mL)] Diluent: PCT negative sample. Enter the dilution factor on the instrument. The instrument calculates automatically (to program a dilution refer to the Vidas 3 manual).
>2000 ng/mL (after dilution)	If the recommended dilution does not give results within the clinically reportable range, report as: "> 2000 ng/mL".

LIS Reporting

Use LIS function MEM to enter results

Enter Shift: (1, 2, or 3)

Worksheet: Use SVIDAS for SGMC or WVIDAS for WAH

Test: <Enter>

Enter "A" (Accept)

Enter Accession number

Press <Enter> until Result screen is displayed

Enter Numeric Value
Enter "D" (Display Prior)
Enter "A" (Accept) to release result

11. EXPECTED VALUES

11.1 Reference Ranges

<0.10 ng/mL

11.2 Critical Values

None established

11.3 Standard Required Messages

None established

12. CLINICAL SIGNIFICANCE

Sepsis is a daily challenge in intensive care units. There are various known therapeutic strategies to improve survival in patients with sepsis. Early assessment is important for determination of the appropriate treatment. PCT is the prohormone of the hormone calcitonin, but PCT and calcitonin are distinct proteins. Calcitonin is exclusively produced by C-cells of the thyroid gland in response to hormonal stimuli, whereas PCT can be produced by several cell types and many organs in response to pro-inflammatory stimuli, in particular by bacterial products.

In healthy people, plasma PCT concentrations are found to be below 0.1 ng/mL. PCT level rises rapidly within 6 to 12 hours after a bacterial infectious insult with systemic consequences. Early onset of multiple traumas, major surgery, severe burns, or in neonates, PCT levels can be elevated independently of an infectious process, but the return to baseline is usually rapid. Viral infections, bacterial colonization, localized infections, allergic disorders, autoimmune diseases, and transplant rejection do not usually induce a significant PCT response (values < 0.5 ng/mL). Therefore, by evaluating PCT concentrations, the physician may use the findings to aid in the risk assessment for progression to severe sepsis and septic shock.

The results should be evaluated in context of all laboratory findings and the total clinical status of the patient. In cases where the laboratory results do not agree with the clinical picture or history, additional tests should be performed.

13. PROCEDURE NOTES

- **FDA Status:** Approved
- **Validated Test Modifications:** None

The instrument reporting system contains error messages to warn the operator of specific malfunctions. Any report slip containing such error messages should be held for follow up.

14. LIMITATIONS OF METHOD

14.1 Analytical Measurement Range (AMR)

0.05 – 200.00 ng/mL

14.2 Precision

Precision is assessed by analysis of plasma samples of known values, run in triplicate. The data appears consistent and all parameters have a low CV%.

14.3 Interfering Substances

Interference may be encountered with certain samples containing antibodies directed against reagent components. For this reason, assay results should be interpreted taking into consideration the patient's history and the results of any other tests performed.

14.4 Clinical Sensitivity/Specificity/Predictive Values

The following compounds, tested at the concentrations indicated in the table, do not affect the VIDAS[®] B•R•A•H•M•S PCT test.

Tested Compound	Tested Concentration
Protein (albumin)	4g/dL
Human Calcitonin	60 ng/mL
Human Katalcalcin	10ng/mL
Human a-CGRP	10µg/mL
Human b-CGRP	10µg/mL

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.

PCT strip causes serious eye damage. Wear protective gloves/protective clothing/eye protection/face protection. IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.

16. RELATED DOCUMENTS

- Safety Data Sheets
- Biomerieux Vidas 3 Reference Manual
- Quality Control Program policy
- Laboratory Safety Manual
- VIDAS 3 Maintenance Log (AG.F394)
- Current package insert for VIDAS® B·R·A·H·M·S PCT

17. REFERENCES

1. VIDAS System package insert. Refer to the insert for the complete details of the procedure, references, and performance of this product.
2. Package insert, VIDAS® B·R·A·H·M·S PCT, BIOMERIEUX, 02/2017

18. REVISION HISTORY

Version	Date	Section	Reason	Reviser	Approval
0	7/19/19	14.1	Corrected upper AMR value	L Barrett	R SanLuis

19. ADDENDA

VIDAS 3 Maintenance

VIDAS 3 Maintenance

DAILY: Check Temperatures

- Go to System
- Display Temps
- Review Temps Listed for SPR, Tray, Cooling unit, and the internal temp to make sure they are in the range on the maintenance log

MONTHLY: Clean SPR Block

- Select **System** from Navigation Toolbar
- Select **Maintenance**
- Select **SPR block cleaning** from the Maintenance Configuration List Option
- Select **[START]** in the Action Bar. The SPR blocks are moved to the home position
- Turn **OFF** the instrument by pressing the power switch on the right side. Wait until the instrument has completely turned off.
- Select **Validate Step** to confirm
- Open the section flap doors
- Flip the SPR block towards you and hold it in this position to easily access all surfaces of the block
- Clean all surfaces with a decontamination wipe
- When cleaning the rear surfaces of the SPR block, press each SPR liner to clean the bottom
- Using a Dacron swab moistened clean the interior
- Using a Dacron swab clean the interior of each SPR liner with a 10% bleach solution
- On the VIDAS screen validate the completion of the SPR block cleaning
- Close the section flap doors
- Select **Validate Step** to confirm
- Turn ON the instrument and wait for it to initialize
- Remove and reinsert the racks to resolve errors
- After initialization of the instrument select Validate step
- Select COMPLETED

SIX MONTH MAINTENANCE: Clean Housing and Cover

- Clean vials, tubes and disposables
- Clean waste drawer
- Clean reagent strip sections
- Wipe off screen