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WORK INSTRUCTION

J-W-CH-1955-01

DXC 800 (PAB) PREALBUMIN

St. Joseph Medical Center, Tacoma, WA

St. Clare Hospital Lakewood, WA

St. Anthony Hospital Gig Harbor, WA
St. Elizabeth Hospital Enumclaw, WA
Highline Medical Center Burien, WA

Harrison Medical Center, Bremerton, WA
 Harrison Medical Center, Silverdale, WA
 PSC

PURPOSE

To provide instructions for the quantitative determination of prealbumin on the DXC 800.

PRINCIPLE

PAB reagent, when used in conjunction with SYNCHRON LX[®] System(s), UniCel[®] DxC 600/800 System(s) and SYNCHRON[®] Systems PAB Calibrator, is intended for quantitative determination of Prealbumin concentration in human serum or plasma.

BACKGROUND

Clinical Significance

Measurement of prealbumin (transthyretin) in serum aids in the assessment of nutritional status. Prealbumin levels decrease in protein-energy malnutrition and return toward normal values with nutritional repletion. Increased prealbumin concentrations are found in patients with a positive nitrogen balance. Prealbumin has also been used to monitor nutritional therapy during the transition from total parenteral nutrition to oral or enteral feeding.

Methodology

PAB reagent is used to measure the Prealbumin concentration by a turbidimetric method. In the reaction, Prealbumin combines with specific antibody to form insoluble antigen-antibody complexes.

The SYNCHRON[®] System(s) automatically proportions the appropriate sample and reagent volumes into the cuvette. The ratio used is one part sample to 70 parts reagent. The system monitors the change in absorbance at 340 nanometers. This change in absorbance is proportional to the concentration of PAB in the sample and is used by the System to calculate and express PAB concentration based upon a single point, non-linear calibration curve.

Prealbumin + Anti-prealbumin Antibody ——— Antigen-antibody (antigen)	Complex
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E015297LEPS

RELATED DOCUMENTS

R-PO-CH-0810	Quality Control Program General Laboratory
R-PO-CH-0809	Quality Control Westgard Rules Statistics
R-PR-AD-0540	Specimen Rejection/Cancellation Protocol
J-F-CH-0820	DXC 800 Controls
J-F-CH-0826	DXC 800 Calibrators
J-F-CH-1940	DXC Analytical Measurement Range

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SPECIMEN

Type of Specimen

Biological fluid samples should be collected in the same manner routinely used for any laboratory test. Freshly drawn serum or plasma is the preferred specimens. Acceptable anticoagulants are listed in the PROCEDURAL NOTES section of this chemistry information sheet. Whole blood or urine are not recommended for use as a sample.

Specimen Storage and Stability

- 1. Tubes of blood are to be kept closed at all times and in a vertical position. It is recommended that the serum or plasma be physically separated from contact with cells within two hours from the time of collection.
- 2. Separated serum or plasma should not remain at room temperature longer than 8 hours. If assays are not completed within 8 hours, serum or plasma should be stored at +2°C to +8°C. If assays are not completed within 48 hours, or the separated sample is to be stored beyond 48 hours, samples should be frozen at -15°C to -20°C. Frozen samples should be thawed only once. Analyte deterioration may occur in samples that are repeatedly frozen and thawed.

Sample Type	Volume	Sample Stability
Plasma/Serum	0.5mL	 Separate serum from cells within 2 hours
		 Room Temp 8 hours
		 Refrigerated 48 hours
		 Frozen 3 months

Criteria for Unacceptable Specimens

See Specimen Rejection/Cancellation Protocol

Sample Volume

A filled 0.5 mL sample cup is the optimum volume. For optimum primary sample tube volumes in primary tube samples and minimum volumes, refer to the Primary Tube Sample Template for your system.

REAGENTS

Contents

Each kit contains the following items: Two PAB Reagent Cartridges (2 x 100 tests) One lot-specific Parameter Card

Volume per Test	
Sample Volume	3μL
Total Reagent Volume	210 µL
Cartridge Volumes	A 200 µL
-	В
	C 10 µL

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Reactive Ingredients	
Reagent Buffer	32.mL
PAB antibody specific for human prealbumin(goat)	4.0 mL

Also non-reactive chemicals necessary for optimal system performance.

Reagent Preparation

No preparation is required.

Acceptable Reagent Performance

The acceptability of a reagent is determined by successful calibration and by ensuring that quality control results are within your facility's acceptance criteria.

Reagent Storage and Stability

PAB reagent, when stored unopened at +2°C to +8°C, will remain stable until the expiration date printed on the cartridge label. Once opened, the reagent is stable for 60 days unless the expiration date is exceeded. DO NOT FREEZE.

CALIBRATION

Calibrator Required

SYNCHRON[®] Systems PAB Calibrator

Calibrator Preparation

No preparation is required.

Calibrator Storage and Stability

SYNCHRON[®] Systems PAB Calibrator is stable until the expiration date printed on the calibrator bottle if capped and stored in the original container at +2°C to +8°C.

Calibration Information

- 1. The system must have a lot-specific parameter card and a valid calibration adjustment in memory before controls or patient samples can be run.
- 2. Under typical operating conditions the PAB reagent cartridge must be calibrated every 30 days and also with certain parts replacements or maintenance procedures, as defined in the SYNCHRON LX Maintenance Manual and Instrument Log, or the UniCel DxC 600/800 System Instructions For Use (IFU) manual. This assay has within-lot calibration available. Refer to the SYNCHRON LX Operations Manual, or the UniCel DxC 600/800 System Instructions For Use (IFU) manual for information on this feature.
- 3. For detailed calibration instructions, refer to the SYNCHRON LX *Operations Manual*, or the UniCel DxC 600/800 System *Instructions For Use* (IFU) manual.

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4. The system will automatically perform checks on the calibration and produce data at the end of calibration. In the event of a failed calibration, the data will be printed with error codes and the system will alert the operator of the failure. For information on error codes, refer to the SYNCHRON LX *Diagnostics and Troubleshooting Manual*, or the UniCel DxC 600/800 System *Instructions For Use* (IFU) manual.

Traceability

For Traceability information refer to the Calibrator instructions for use.

QUALITY CONTROL

See Related Documents J-F-CH0820 DXC 800 Controls

STEPS

- 1. Load the reagent onto the system. A lot-specific parameter card must be loaded one time for each lot.
- 2. After reagent load is completed, calibration may be required.
- 3. Program samples and controls for analysis.
- 4. After loading samples and controls onto the system, follow the protocols for system operation.

For detailed testing procedures, refer to the SYNCHRON LX *Operations Manual*, or the UniCel DxC 600/800 System *Instructions For Use* (IFU) manual.

CALCULATIONS

SYNCHRON[®] System(s) perform all calculations internally to produce the final reported result. The system will calculate the final result for sample dilutions made by the operator when the dilution factor is entered into the system during sample programming.

ANTICOAGULANT TEST RESULTS

The following anticoagulants were assessed by Deming regression analysis with a minimum of 50 paired serum and plasma samples. Values of serum (X) ranging from 15.5 to 35.0 mg/dL were compared with the values from plasma (Y) yielding the following results: Acceptable Anticoagulants

Anticoagulant Level Tested for In Vitro Interferen	
Lithium Heparin	14 Units/mL
Sodium Heparin	14 Units/mL

PERFORMANCE CHARACTERISTICS

Reference Range

18 – 45 mg/dL

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Analytic Range

The SYNCHRON[®] System(s) method for the determination of Alkaline Phosphatase provides the following analytical range:

Sample Type	Conventional Units
Serum or Plasma	2 – 60 mg/dL

Reporting results outside of analytical range

Lower limit of detection	2 mg/dL	Results below 2; report < 2mg/dL
Upper limit of detection	60 mg/dL	Results > 60 should be diluted with 0.9% saline, reanalyzed and dilution factor applied. The maximum allowable dilution is X2. Results >120 are reported as >120 mg/dL.

Sensitivity

Sensitivity is defined as the lowest measurable concentration which can be distinguished from zero with 95% confidence. Sensitivity for PAB determination is 2 mg/dL (20 mg/L).

LIMITATIONS

None identified.

Interferences

1. The following substances were tested for interference with this methodology:

Substance	Source	Level Tested	Observed Effect
Hemoglobin	RBC hemolysate	500 mg/dL	No Significant Interference (within +/- 1.4 mg/dL or 8%)
		INDEX of 10	
Bilirubin	Porcine	30 mg/dL	No Significant Interference (within +/- 1.4 mg/dL or 8%)
		INDEX of 20	
Lipemia	Human	2+	No Significant Interference (within +/- 1.4 mg/dL or 8%)
		INDEX of 5	

2. Refer to References for other interferences caused by drugs, disease and preanalytical variables.

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DOCUMENT APPROVAL Purpose of Document / Reason for Change:

Formatting, changed dilution to be with saline per Beckman procedure, added max dilution

No significant change to process in above revision. Per CAP, this revision does not require further Medical Director approval.

Committee Approval Date	 Date: N/A – revision of department- specific document which is used at only one facility 	Medical Director Approval (Electronic Signature)	9/25/15	
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