

PURPOSE:

To provide instruction for performing reagent quality control (QC) on the Ortho Vision[®] and the use and handling of reagents, diluents, MTS gel cards and other materials.

PRINCIPLE & CLINICAL SIGNIFICANCE:

A quality control program is established to ensure reagents; antisera and the Ortho Vision[®] perform as expected prior to reporting of patient or blood component test results. Validity of routine test results are evaluated by testing the reagents with a commercially available QC kit and samples prepared according to manufacturer's recommendations. Quality control testing is considered acceptable if valid positive and negative results are obtained for each reagent tested.

Resources used with the analyzer must be tracked, monitored and discarded as per manufacturer requirements and expiration dates. The Resources screen is used to monitor, discard, and replenish resources as needed.

POLICIES:

- Quality control (QC) testing is performed:
 - Each day of use
 - Whenever a new reagent lot number is placed into use this includes MTS Gel Cards
 - After maintenance (daily, weekly, monthly, yearly)
 - After service or repair of the analyzer
- QC testing is performed daily on both analyzers in use. Quality control results of a reagent on one analyzer, is not acceptable for use on the 2nd analyzer unless QC is repeated on the 2nd analyzer prior to reporting of patient or blood component test results.
- Unexpected results are investigated and resolved prior to reporting patient or blood component test results
- Each lot of reagent and MTS gel card in use is quality control tested and must meet acceptance criteria prior to verification and reporting of patient or blood component testing. Patient and blood component samples may be run in parallel with the control samples as long as this requirement is met.
- All antisera and cellular reagents are stored per manufacturer instructions when not in use
- Preparation of ABO/Rh and antibody screen controls may be necessary if AlbaQ-Chek samples are unavailable, expired or at an inadequate volume

- The supply drawer is not intended for reagent or diluent storage
 - Agitated and non-agitated reagents must be loaded in the appropriate locations on the rotor to ensuring reagents remain suspended in solution

REAGENT	LOCATION
Agitated	Inner Rotor
Non-agitated	Outer Rotor

- <u>Table 1: MBC QC Test Profiles, Reagents, QC Samples</u> lists the QC Test Profiles required for daily QC and the MTS[®] Gel Cards, reagents, diluents and QC samples required for each. If circumstances prevent testing a QC Test Profile, patient and blood component samples will not be tested on the analyzer.
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- **DAILY:** The following Test Profiles are performed daily on each analyzer:
 - Type and Screen
 - Donor Rh Pos
 - Donor Rh Neg
 - DAT Poly
 - DAT IgG
- **DAY OF USE**: Rh Phenotype profile is performed on day of use only. Rh Phenotype card QC is not programmed and must be run before or with patient/donor testing, results printed and attached to QC log
- NO QC: The following test profiles do not have a corresponding QC test profile. The reagents used are QC as part of the Type and Screen Profile which must be complete and acceptable prior to use of these test profiles:
 - Blood Type
 - Antibody screen
 - Cord Blood

Table 1: MBC QC Test Profiles, Reagents, QC Samples

QC Test Profile	MTS [®] Gel Card	Reagent Red Blood Cells	Diluents	QC Sample
Type and Screen	 MTS[®] A/B/D Monoclonal and Reverse Grouping Card MTS[®] Anti-IgG Card 	 0.8% AFFIRMAGEN[®] Reagent Red Blood Cells 0.8% SURGISCREEN[®] Reagent Red Blood Cells 	MTS Diluent 2 Plus	 AlbaQ-Chek Level1- QC1 AlbaQ-Chek Level2- QC2 AlbaQ-Chek Level3- QC3
Donor Rh Pos	 MTS[®] A/B Monoclonal Grouping Card 	N/A	MTS Diluent 2 Plus	 AlbaQ-Chek Level1- QC1 AlbaQ-Chek Level3-
Donor Rh Neg	 MTS[®] A/B/D Monoclonal Grouping Card 	N/A	MTS Diluent 2 Plus	QC3
DAT Poly	 MTS[®] Anti-IgG,- C3d Polyspecific Card 	N/A	MTS Diluent 2	 AlbaQ-Chek Level4- QC4 (IgG C₃ NEG) IgG POS prepared cells C3 POS prepared cells

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QC Test Profile	MTS [®] Gel Card	Reagent Red Blood Cells	Diluents	QC Sample
DAT lgG	 MTS[®] Anti-IgG Card 	N/A	MTS Diluent 2	 AlbaQ-Chek Level4- QC4 (IgG C3 NEG) IgG POS prepared cells
Rh Phenotype (performed only on day of use)	 MTS[®] Monoclonal Rh Phenotype Card 	N/A	MTS Diluent 2 Plus	Panel A or B cells with the following specification prepared in Diluent 2 Plus • R_1R_1 • R_2R_2 • r'r • r"r

• Resources are stored and used according to manufacture requirements and current Good Manufacturing Practices.

- Storage and onboard stability requirements are found in <u>Table 2</u>: <u>Resource</u> <u>Storage Requirements and Onboard Stability</u>.
- General specifications for use are listed in <u>Table 3: Use and Handling of</u> <u>Resources</u>

Table 2: Resource Storage Requirements and Onboard Stability

Materials	Storage Requirements	Use Requirements	On-Board Stability	Comments
MTS [®] A/B/D Monoclonal and Reverse Grouping Card MTS [®] A/B/D Monoclonal Grouping Card MTS [®] A/B Monoclonal Grouping Card	2-25°C	Room temperature	Refer to manufacture expiration date on card	 Store in an upright position
MTS [®] Anti-IgG,-C3d Card				
MTS [®] Monoclonal Rh Phenotype Card				
MTS [®] Diluent 2 Plus				Diluents should not be left on the analyzer
MTS [®] Diluent 2	2-8°C	Room temperature	24 hours	 longer than 24 hours. Change diluent bottles prior to performing daily QC
0.8% AFFIRMAGEN [®] Reagent Red Blood Cells	2-8°C	Room temperature	5 days (120 hours)	Reagent red cells should not be left on the instrument longer than 5

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Matariala	Storage	Use	On-Board	0
0.8% SURGISCREEN [®] Reagent Red Blood Cells	Requirements	Requirements	Stability	 Comments days. Ensure reagent red cells are properly re- suspended prior to use. Return reagents to refrigerated storage when not in use.
IgG Coated Cells			Manufactured at time of	Discard after use for quality
C3 Coated Cells	2-8°C	Room temperature	 Expires 24 hours after manufacture 	control testing – May be used for same day automated and manual quality control testing prior to discard
AlbaQ-Chek [®] QC Kit:	2-8°C	Room temperature	 Used only during quality control testing Stored in the reagent refrigerator Vials expire 7 days from opening 	 Kit contains the following: Vial 1 (QC1) – Group A RhD Negative (rr) containing Anti-B, Anti-D Vial 2 (QC2) – Group O RhD Positive (R1R1) containing Anti-A, Anti-B, Anti-C Vial 3 (QC3) – Group B RhD Positive (R1r) containing Anti-A Vial 4 (QC4) – Group A₂B RhD Positive

Table 3: Use and Handling of Resources

Resource	Specification for Use		
	• Do not use any reagents including quality control samples if evidence of contamination is present.		
	Do not use if extreme turbidity, precipitation, or hemolysis is present		
Red Blood Cell	 All reagent red blood cells and diluents must be at room temperature when loaded on the system 		
Reagents, QC Samples, and Diluents	 Prior to loading on the Vision, reagent red blood cells must be gently inverted to mix the red blood cells until they are completely suspended in the diluent: 		
	 Reagents should not be agitated in a manner that will not cause bubbles in the fluids 		
	 Remove any bubbles from reagent using an applicator stick or a transfer pipette before loading on the system 		

Resource	Specification for Use		
	Care should be used to maintain the concentration and integrity of all		
	reagents		
	• If there is suspicion of testing performed with reagent red blood cells that		
	were not completely suspended:		
	 Discard the entire set of reagent red cells (ie: A1 and B cells, all 3 		
	screen cells) and		
	Repeat testing with a new set of reagent red cells.		
	Replace reagent caps on 10mL reagent red blood cell vials with		
	disposable ORTHO VISION [®] Evaporation Cap prior to loading on the		
	system to prevent evaporation of liquid. In extreme laboratory conditions,		
	such as 15% relative humidity and a temperature of 30° C, excessive		
	evaporation of Ortho Reagent Red Blood Cells reagent may be observed		
	and result in analyzer error.		
	 ORTHO VISION[®] Evaporation Cap are intended to be single use 		
	and only used on reagent red blood cell vials		
Red Blood Cell	 Do not remove ORTHO VISION[®] Evaporation Cap from one viai 		
Reagents, QC	and place on another vial		
Samples, and	Discard used ORTHO VISION* Evaporation Cap when the vial is discarded		
Diluents	uiscalueu		
	• Fleshiy Opened 0.0% Aminiagen, and 0.0% Surgiciteen is validated, by the manufacturer for 5 days (120 hours) on-hoard stability when OPTHO		
	VISION [®] Evaporation Cap are used		
	 Do not store reagent red cells that require agitation on-board the system 		
	when the system is in Maintenance Mode or if the system is going to be		
	powered off.		
	 Reagent red cells requiring agitation will be marked unusable if 		
	left on-board when the system is in Maintenance Mode or		
	powered off.		
	• Ortho Reagent Red Blood Cells 0.8% Affirmagen [®] , 0.8% Surgicreen [®] ,		
	Resolve [®] Panels A, B, C Untreated, and C Ficin should be capped and		
	stored at 2 to 8°C when not in use		
	• Freshly opened MTS [®] Diluent and MTS [®] Diluent 2 PLUS may be kept on		
	the analyzer for up to 24 hours of continuous use.		
	 Performance of MTS[®] Diluent 2 PLUS after 24 hours of 		
	continuous use on the analyzer has not been validated.		
Dilution Travs	Dilutions trays may be used only once. Once all wells are used, the tray		
y	should be discarded in a red biohazard container.		
	Do not load cards that appear dried out.		
	Make sure the foil is sealed properly over all columns.		
	Do not manually punch the foil. The system will automatically punch the		
	toil over the correct columns before running the test.		
MTS [®] Gel	Before loading cards to the system, make sure the cards do not contain		
Cards	any ilquid on the foll.		
	 Discard cards with inquid on the foll. Cards with inquid on the foll may cause contamination with the gripper or punch teel 		
	When leading a cleave with more than and let of the same type of gol		
	when loading a sleeve with more than one lot of the same type of gel		
	card, leave an empty slot between lots.		

Resource	Specification for Use		
	 Only load the same type of card in a single sleeve. The system assumes resources in groups separated by an empty slot are all the same type of test. 		
	 Sleeves must be stored upright with the foil facing up at all times. 		
	 Partially used cards are placed in the room temperature incubator by the system and may remain there for up to 4 hour. After 4 hours or if there is no available space in the room temperature incubator, the system will discard the card in the waste drawer Do not manually add partially used cards to the system. Partially used cards, may be used for manual gel testing or quality control. 		
	Only fill containers with liquids at room temperature.		
Liquids	 Liquids should not be agitated in a manner that could cause bubbles in the liquid. 		
 Resources ar 	e tracked monitored discarded and replenished using the Vision Resource		

- Resources are tracked, monitored, discarded, and replenished using the Vision Resource Screen and the Ortho Vision Daily Resource Tracking form
- On-Board management of resources is managed via the **Resources Screen**



- Use touch buttons located on the right side of the screen to display information about each resource refer to **Appendix 1: Resource Screen Access and Use**
- Use touch buttons located in the horizontal bar at the bottom of each screen to act or prompt on the data displayed on the screen – refer to Appendix 2: Resource Action Buttons
- **Ortho Vision Daily Resource Tracking** form is used to track lot number and expiration of reagents that are not captured and monitored by the analyzer.

SPECIMEN REQUIREMENTS: N/A

REAGENTS/SUPPLIES/EQUIPMENT:

Reagents:	Supplies:	Equipment:
 AlbaQ-Check[™] Simulated Whole Blood Controls IgG Sensitized Red Blood Cells ALBAcyte® C3 Coated Red Blood Cells 0.8% AFFIRMAGEN[®] Reagent Red Blood Cells 0.8% SURGISCREEN[®] Reagent Red Blood Cells ID-MTS[®] Diluent 2 ID-MTS[®] Diluent 2 Plus ID-MTS[®] Gel Cards 	 10 x 75 glass tubes 12 x 75 glass or plastic tubes Evaporation caps Dilution trays Applicator sticks Transfer pipettes Sample racks 	Ortho Vision

QUALITY CONTROL: QC is performed daily

INSTRUCTIONS:

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Printing Barcoded Labels for QC Samples Preparing 0.8% IgG and C3 Positive Controls Samples Loading Controls Samples Running Quality Control Programming New QC Control Sample ID or Lot Numbers QC of different ID-MTS Gel Card lots or Reagent Red Cell Lots Managing Failed QC Results Printing QC Result Reports Running Rh phenotype Card QC Clearing Multiple Profile QC Lines (Key Operators Only) Appendix 1: Resource Screen Access and Use Appendix 2: Resource Action Buttons

Printing Barcoded Labels for QC Samples

STEP	ACTION
1	Log into SmarTerm

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STEP	ACTION		
	Enter the appropriate entry when prompted		
	Prompt	Enter	
2	Function	BAR	
	Which medical center (H or U)?	U	
3	Press the down arrow key to move the prom <enter></enter>	pt to "Custom Barcodes" and press	
	Enter the appropriate entry when prompted		
4	Prompt	Enter	
	Enter device or valid printer #	13	
5	Press <enter> to select the UWMC TSL (686) printer</enter>		
	Enter the text for the appropriate specimen	label:	
	If performing QC for MTS [®] Gel card	Enter the following	
	MTS [®] Anti-IgG,- C3d Polyspecific Card	IgG C3 NEG	
6	and/or MTS [®] Anti-laC Card for DAT laC	IgG POS C3 POS	
Ũ		• B ₄ B ₄	
	MTS [®] Managlanal Ph Phanatura Card	• R_2R_2	
	MITS Monocional RIT Phenotype Card	• r'r	
		• r ³³ r	
7	Press <enter> 3 times</enter>		
	Enter the appropriate entry when prompted		
	Prompt	Enter	
0	Do you want sequential labels	Ν	
8	Which medical center (H or U)?	U	
	Enter number of labels to print	1	
	Is this correct	Y	
9	Repeat steps 2 thru 8 to print additional QC	sample labels	
10	Affix the label to the appropriate QC sample scanning by the Vision	e container (tube)in a manner allowing	

Preparing 0.8% IgG and C3 Positive Controls Samples

STEP	ACTION
1	Dispense 2 mL of MTS Diluent 2 into a clean test tube
1	NOTE: The 2 mL sample will be used in steps 4 & 8 below

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STEP	ACTION		
	Label 10 x 75 mL test tube with the appropriate label in a manner that allows the barcode to be read by the analyzer – refer to section <u>Printing Barcoded Labels for</u> QC Samples		
2	If preparing	Then label tube with	
	IgG positive red cell suspension	IgG POS label	
	C3 positive red cell suspension	C3 POS label	
	Add 200µL of sensitized cells to the	labeled tube	
<u> </u>	If preparing	Add	
3	IgG positive red cell suspension	IgG sensitized cells	
	C3 positive red cell suspension	C3 sensitized cells	
4	Add 100µL of MTS Diluent 2		
5	Mix gently to resuspend		
6	Centrifuge at wash setting		
7	Decant the supernatant		
8	Add 400µL of MTS™ Diluent 2 to each tube		
9	Gently mix to re-suspend avoiding bubbles or foaming		
10	 Record the following on the label: Date prepared Time prepared Tech ID 		

Loading Controls Samples

STEP	ACTION
1	 Record the lot number and expiration date for the following on the Ortho Vision Daily Resource Tracking form: AlbaQ-Chek Control samples IgG Check Cells C3 Check Cells 0.8% Affirmagen A1 & B 0.8% Surgiscreen 1, 2, 3 R1R1, R2R2, r'r, and r"r if performing QC of the MTS[®] Monoclonal Rh Phenotype Card

STEP	ACTION			
	If Vials	Then		
	Were previously opened	Go to next step		
2	Are from a new AlbaQ- Chek kit	 Place a IgG C3 NEG barcoded label on Vial 4 in a manner that allows the barcode to be read by the analyzer - refer to section Printing Barcoded Labels for QC Samples Record the following on each vial Open date Expiration date: Samples expire within 7 days or the original expiration date, whichever is shorter Tech ID 		
	lf	Then		
3	Vials were previously centrifuged and red cells and plasma is separated	Go to next step		
	Opening a new kit or Red cells and plasma are not separated	Centrifuge all 4 vials in the kit to separate the red blood cells and plasma in the same manner as patient samples		
4	Gently mix IgG POS and	d C3 POS control samples to resuspend cells		
5	Ensure contents of all co loading on the analyzer	ontrol samples have warmed to room temperature prior to		
	Remove caps from cont	rol samples		
6	NOTE: Cap colors on A	baQ-Chek samples match the number color on each vial		
	Load the QC samples in	nto the appropriate rack		
	AlbaQ-Chek sample	Blue rack S13B with barcodes facing out		
7	IgG POS and C3 POS	 Red rack, S10B with barcodes facing out Leave about half an inch between the tubes and the bottom of the rack, so that the tubes do not rest all the way down. NOTE: This ensures the probe is able to reach the small volume of sample 		

Running Quality Control

STEP	ACTION		
	If performing QC on	Then	
1	New lot number for any reagent	Go to section Programming New QC Sample Lot Numbers	
	Previously QC'd lot number	Go to next step	
	Load the following reagents into the	e appropriate racks	
	Reagent	Rack	
	MTS Diluent 2 PlusMTS Diluent 2	Diluent Rack- N02B	
2	 0.8% AFFIRMAGEN[®] Reagent Red Blood Cells 0.8% SURGISCREEN[®] Reagent Red Blood Cells 	Red Cell Reagent Rack-R10B	
	NOTE: All reagents must be at roo	m temperature prior to testing	
3	Touch <qc> menu button</qc>		
4	Select the QC Test Profile to process – refer to Table 1: MBC QC Test Profiles, Reagents, QC Samples		
5	Touch <run job="" qc=""> action button</run>		
6	Touch <save></save>		
7	Touch <start></start>		
8	Repeat steps 3-7 to select additional test profiles		
8	Touch <samples> then select a ring position into which samples will be loaded</samples>		
9	Touch <load unload=""> and open the door</load>		
10	Select any additional ring positions	into which QC samples will be loaded	
	Place rack(s) in the Load Station and close the door		
11	NOTE: The system will automatically start running the QC as STAT samples once programmed and loaded it will also auto accept results and archive them.		

Programming New QC Control Sample ID or Lot Numbers

STEP	ACTION
1	Verify no samples are running or results waiting to be archived

STEP	ACTION		
2	Touch <qc> menu button</qc>		
3	Select the QC Test Profile for which the QC Sample is associated - refer to Table 1: MBC QC Test Profiles, Reagents, QC Samples		
4	Touch <run job="" qc=""> action button</run>		
5	Touch <change id="" ortho="" qc="" sample=""></change>		
6	Delete the existing number in the sample ID (lot number) Note: To see what QC samples are run with each profile refer to the QC Profiles Table		
	Scan in the new sample ID (lot number) for each sample used for the QC Test Profile – refer to Table 1: MBC QC Test Profiles, Reagents, QC Samples		
7	IMPORTANT: Entering the barcode using the handheld barcode scanner will automatically enter the number twice. If manually typing in the lot number, type the barcode twice.		
8	Touch <save></save>		
9	Repeat steps 2-8 to program additional QC Sample ID (lot number)		

QC of different ID-MTS Gel Card lots or Reagent Red Cell Lots

STE P	ACTION			
1	Load all resources including all lots requiring QC			
2	Touch <qc> m</qc>	ienu button		
3	Touch <run job="" qc=""> action button</run>			
	If new lot of	Then		
4	Red cell reagent	 Touch a reagent lot for the reagent type Touch twice to view all lot numbers that are loaded the analyzer NOTE: If there is more than one reagent lot loaded on the analyzer, the default selection is the lot that was most recently registered. 		
	ID-MTS Gel Card	 Touch a card lot for each required card type Touch the card type twice to view all lots that are loaded on the analyzer. NOTE: If there is more than one required card lot loaded on the analyzer, the default selection is the lot that was most recently registered. 		

Managing Failed QC Results

STEP	ACTION				
	Select the failed QC sample				
	lf	Then			
1	Failure is due to reason that does not affect the result (ie: dust on the card)	 Modify the result and accept the results. Refer to SOP Ortho Vision[®] Results Management 			
1	QC should be repeated	Reject the failed QC sample profile			
		Go to Step 3			
		NOTE: If only one sample of a QC Test Profile fails, only the sample that failed needs to be repeated			
	Touch <run job="" qc=""></run>				
2	NOTE: The failed QC run will remain on the MBC QC Profile list as failed				
3	Touch <save></save>				
4	Touch <start></start>				

Printing QC Result Reports

STEP	ACTION		
1	Touch <qc> menu button</qc>		
2	Touch the MBC Test Profile Name		
	NOTE: Each profile needs to be individually printed		
3	Touch <show history="" qc="" report=""></show>		
4	Touch <presets></presets>		
5	Touch <today> and <ok> to display the report</ok></today>		
6	Touch <print></print>		
7	Review the report to verify QC is acceptable		
8	Record the following at the bottom of the report:Date of ReviewTech ID		
9	Repeat steps 1 thru 8 for additional Test Profile QC results		

Running Rh phenotype Card QC

STEP	ACTION		
1	 Select QC samples with the following phenotypes from reagent panels cells to run alongside your patient/donor sample: R₁R₁ R₂R₂ r'r r"r 		
2	Remove Rh Phenotype cards from refrigerator and allow to come to room temperature		
3	Label 10x75mm tubes with phenotype selected EXAMPLE: R ₁ R ₁		
4	Aliquot 7-10 drops of corresponding cells into labeled tubes		
5	Load Tubes into a red S10B sample rack and load into the analyzer		
6	Assign to a ring position after the system alerts of a unreadable barcode		
7	Close load station door		
8	Touch <sample> and <create order=""></create></sample>		
9	Touch <1 st sample liquid type>		
10	Touch <assigned profiles=""> and <rh phenotype=""></rh></assigned>		
11	Touch <save> and <start></start></save>		
12	Go to section Printing QC Result Reports when testing is complete		

Clearing Multiple Profile QC Lines (Key Operators Only)

STEP	ACTION			
1	Verify no samples are running and that there are no results waiting to be archived			
	NOTE: Profiles cannot be cleared while samples are running or results are pending			
2	Touch <stop processing=""> twice</stop>			
3	Touch <setup> and <testing></testing></setup>			
4	 Touch <grouping into="" profiles="" tests=""> tab</grouping> Touch <show details=""></show> 			
	NOTE: A list of all the testing profiles is displayed; only the tests listed as MBC (Method Based Control) need to be reprogrammed with each new lot.			

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STEP	ACTION					
5	Touch the desired profile (it should be highlighted in white)					
6	Touch <show c<="" td=""><td>QC Samples></td><td></td><td></td><td></td></show>	QC Samples>				
7	 Touch the QC sample to delete Touch <delete selected=""></delete> Repeat until all necessary QC Samples are deleted 					
8	• Touch <cre< td=""><td>ate QC Sample></td><td></td><td></td><td></td></cre<>	ate QC Sample>				
9	 Touch QC sample type and select either: Ortho QC Sample Type and Screen Test Profile Donor Rh Pos Test Profile Donor Rh Neg Test Profile User defined QC sample DAT Poly Test Profile 					
	If using	Then				
	Ortho QC sample	Touch <ortho qc="" si<br="">will auto populate Test Type and Screen Donor Rh Pos Donor Rh Neg</ortho>	Sample ID> and s Sample Type Ortho QC Sample	Liquid Type AlbaQ-Chek	Expected Results Will auto populate	
10		 I ouch <1st sample ID> and scan barcode Touch <1st Sample Liquid Type> and select according to the liquid type listed below Touch <expected results=""> and select result according expected results listed below</expected> 				
	User defined QC sample	DAT Poly Test	Liquid 7	Type Exp	ected Results	
		IgG C3 NEG	CentBl	bod	NEG	
			0.8% C			
					PUS Expected Reculto	
			CentRl	od Cxh	NFG	
			0.8% c	ells	POS	
	For Ortho Defin	ed QC Sample	0.0700			
11	Note: For expected results for each AlbaQ-Chek samples go to: Result Interpretation in tests with AlbaQ-Chek and Routine Blood Bank Reagents					

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STEP	ACTION
12	Follow these steps to clear each old lot Profile QC line when a new lot of cards/reagents/diluents or other is introduced to the system

CALCULATIONS/INTERPRETATIONS/RESULTS REPORTING/NORMAL VALUES/CRITICAL VALUES NA

EXPECTED RESULTS: Type and Screen Test Profile

MTS™ A/B/D Monoclonal and Reverse Grouping Card							MTS™ /	Anti-Ig	G Caro	d	
А	BO/Rh	Anti- A	Anti- B	Anti- D	Ctrl	A ₁ Cells	B Cells	Antibody Detection	SC 1	SC 2	SC 3
QC1	Expected Results	3-4	0	0	0	0	3-4	Expected Results	3-4	3-4	0
QC2	Expected Results	0	0	3-4	0	3-4	3-4	Expected Results	0	3-4	3-4
QC3	Expected Results	0	3-4	3-4	0	3-4	0	Expected Results	0	0	0
QC4*	Expected Results	3-4	3-4	3-4	0	0	0	Expected Results	0	0	0

* QC4 is not routinely used for QC of the Type and Screen Test Profile.

Donor Rh Neg Test Profile

MTS™ A/B/D Monoclonal Grouping Card					
ABO	ORh	Anti-A	Anti-B	Anti-D	
QC1	Expected Results	3-4	0	0	
QC3	Expected Results	0	3-4	3-4	

Donor Rh Pos Test Profile

MTS™ A/B Monoclonal Grouping Card					
A	30	Anti-A	Anti-B		
QC1	Expected Results	3-4	0		
QC3	Expected Results	0	3-4		

DAT Poly Test Profile

MTS™ IgG,-C3d Polyspecific Card					
Poly	DAT	lgG,-C3d			
lgG POS	Expected Results	3-4			
C3 POS	Expected Results	3-4			
QC4	Expected Results	0			

DAT IgG Test Profile

MTS™ IgG Card					
lgG	DAT	lgG			
IgG POS	Expected Results	3-4			
QC4	Expected Results	0			

Rh Phenotype Test Profile

MTS™ Monoclonal Rh Phenotype Card							
Rh Phe	enotype	Anti-D	Anti-C	Anti-E	Anti-c	Anti-e	Ctl
R₁R₁	Expected Results	+	+	-	-	+	-
R_2R_2	Expected Results	+	-	+	+	-	-
r'r	Expected Results	-	+	-	+	+	-
r"r	Expected Results	-	-	+	+	+	-

CALIBRATION:

NA

PROCEDURE NOTES AND LIMITATIONS:

- An Onboard Inventory Report may be printed to assist in performing and verifying QC:
 - Touch <Resources>
 - Touch <Overview>
 - Touch <Show Inventory Log>
 - Touch <Print>
- Biohazard material is disposed of according to local regulations and University of Washington Medical Center guidelines
- The user is responsible for monitoring the length of time the reagents have been on board the analyzer refer to *Ortho Vision Daily Resource Tracking* form

- When using automated instruments, refer to the limitations contained in the operator's manual provided by the device manufacturer. Strict adherence to the procedures and recommended equipment is essential.
- Proper centrifuge calibration is particularly important to the performance of the ID-MTS™ Gel Test. The ORTHO™ Workstation and ORTHO VISION™ Analyzer have been exclusively designed to provide the correct time, speed and angle.
- Hemolyzed and grossly icteric blood samples may cause difficulty in interpretation, and test
 results should be used with caution. Occasionally, specimens showing incomplete clotting or
 excess particulates may need to be washed prior to testing
- Make sure to select the proper sample type before proceeding. Selecting an incorrect sample type may cause incorrect results.
- When a 2nd MLS is not available to perform the review and patient or unit test results must be reported, the MLS tech will independently review the QC results to verify acceptability of result prior to reporting patient testing
- False positive or false negative test results may occur from bacterial or chemical contamination of test materials, aged or hemolyzed blood specimens, inadequate incubation time or temperature, improper centrifugation, improper storage of materials, or omission of test samples.
- Antibodies to preservatives, medications, disease states, Wharton's jelly, and/or crosscontamination of reaction microtubes may cause false positive reactions.
- False positive results may occur if a card that shows signs of drying is used in testing.
- Red blood cells must be diluted to 4% ± 1% in MTS[™] Diluent 2 *PLUS* before addition to the microtubes of MTS Gel cards for AB, ABD or ABO/Rh testing.
- Red blood cells must be suspended in MTS[™] Diluent 2 or be a commercial 0.8% red blood cell in a low ionic strength diluent specifically approved for use in the ID-Micro Typing System[™] to be used with MTS IgG or MTS Anti-IgG, -C3d gel cards.
- Some weak subgroups of the A and B antigen may not be detected by these MTS[™] Anti-A and Anti-B reagents. The use of the MTS[™] Monoclonal Anti-A,B Card may better detect these weak antigens.
- Variations in red blood cell concentration can markedly affect the sensitivity of test results. If
 red blood cell suspensions are too concentrated, they can give weaker results due to the
 increase in the antigen/antibody ratio. In addition, cells may fail to completely migrate to the
 bottom of the microtube and could cause a false positive interpretation. When red blood
 cells are too low in concentration, they become difficult to visualize and, in extreme cases, a
 weak positive can fail to be detected.
- Rouleaux caused by serum or plasma with abnormally high concentrations of protein (such as in patients with multiple myeloma or Waldenstrom's macroglobulinemia or from patients who have received plasma expanders of high molecular weight) may infrequently cause difficulties in ID-MTS[™] Gel Test interpretation, false positive results or hazy reactions may occur with these samples but are rare. If false positive reactions (e.g., rouleaux, cells coated with immunoglobulins, etc.) occur in the control gel, the blood group cannot be established. Additional testing will be necessary to resolve this false positive reaction. Refer to SOPs-*ABO/Rh Discrepancy* and *Saline Replacement*.
- Suppressed or diminished expression of certain blood group antigens may give rise to false
 negative reactions. For this reason, caution should always be exercised when assigning the
 ABO phenotype. The results of forward grouping (red blood cell) testing should be confirmed
 by reverse grouping (serum) testing.
- In some patients (e.g., newborns, elderly or immunocompromised patients) the expected ABO antibodies may be weak or missing. For any recipient whose ABO group cannot be

accurately determined, group O red blood cells should be considered as a transfusion alternative. The interpretation of reactions obtained when testing infant blood may be complicated by the fact that the infant's serum does not necessarily contain antibody for any antigen absent from the cells, and passive anti-A and/or Anti-B from the mother's circulation may yield conflicting reactions when tests are performed on cord blood specimens. Cord blood specimens may also give weaker than normal reactions in the cell grouping test. Imperfect development of the ABH antigens at birth may lead to false negative results, particularly with Anti-A reagents.

- When using automated instruments, refer to the limitations contained in the operator's manual provided by the device manufacturer
- Anomalous results may be caused by fibrin or other particulate matter in blood samples that could stick to the sides of the microtube during ABO/Rh testing.
- Anomalous results may be caused by fresh serum, fibrin, or particulate matter in serum or plasma, or red blood cells that stick to the sides of the microtube of MTS IgG or MTS Anti-IgG, -C3d gel cards. Anomalous results (i.e., a line of red blood cells on the top of the gel) may be observed with serum samples and can be minimized with the use of EDTA plasma
- The MTS[™] Anti-IgG Card is not manufactured to detect Anti-C3 cell sensitizations. It may be used in the compatibility test; however, some literature reports indicate that the Anti-IgG may occasionally fail to detect antibodies that are demonstrable by the use of antiglobulin reagents containing Anti-C3.
- There is the potential for IgM antibodies to react to anti-IgG testing. Some patient antibodies that are IgM in nature may react with corresponding antigens in the upper portion of the microtube and be trapped in the top portion of the gel at the time of centrifugation resulting in a positive reaction.
- Negative direct antiglobulin test results do not necessarily rule out hemolytic disease of the newborn (HDN), especially if ABO incompatibility is suspected.

REFERENCES:

- ORTHO VISION® Analyzer Procedure Pub. No. J56102
- ORTHO VISION® Analyzer General Operator Training Manual
- AlbaQ-Chek[™] Simulated Whole Blood Controls Package Insert
- Antibody Identification Method (with Auto Control) Using MTS[™] Anti-IgG Cards

RELATED DOCUMENTS:

FORM Ortho Vision Daily Resource Tracking

APPENDICES:

Appendix 1: Resource Screen Access and Use

Resource	To access	Use
Reagents	Reagents Screen Touch <resources> Touch <reagents></reagents></resources>	To evaluate current inventory of reagents loaded on the system and manage reagent lots
	 Load/Unload button Touch <show details=""> while in Table View</show> 	Loading and unloading reagents as needed
Reagents Lots	Reagent Lot information Touch <resources></resources> Touch <reagent lots=""></reagent> 	To register lots and view information about reagent kits. Information displayed may include Lot # Expiration Date Onboard reagents

Resource	To access	Use
		 QC status if applicable Reagent Kit – The name of the reagent kit or reagent family associated with the lot
Dilution Trays	 Dilution Trays screen Touch <resources></resources> Touch <dilution trays=""></dilution> 	To view information about the availability and position of dilution wells
Cards	Cards screen • Touch <resources> • Touch <cards></cards></resources>	 To view: Card carton position and other associated information, such as location and lot expiration dates Card type, errors and warnings
Waste	Waste screen Touch <resources> Touch <waste></waste></resources>	 To view the current status of the waste drawer, card waste drawer and liquid waste bottle. Information displayed includes: Total Capacity – Available fill level Current Capacity – Free fill level Time Until Full – An expected fill level and estimated time until the fill level is reached.
Liquids	Liquid screen • Touch <resources> • Touch <liquids></liquids></resources>	To monitor the availability of deionized water and saline on the system.
Manual Load/Review	Manual Load/Review Touch <resources></resources> Touch < Manual Load/Review 	To view the status of tests on the system requiring manual review. NOTE: This screen only provides access to the manual review function. It does not allow use of the LOAD AREA in the DUAL PURPOSE DRAWER.

Appendix 2: Resource Action Buttons

Action Button	Name	Description
ţ	Assign to Position	Displays the Assign to Position wizard.
Ĵ	Change View	Switches the display between a diagram view and a table view.
И	Show Details	Displays additional information for the selected item.
*	Empty Liquid	Starts a wizard which guides you through the process of emptying the liquids container.
	Empty Cards	Starts a wizard which guides the user through the process of emptying the Cards container.
ω±	Load/Unload	Starts a wizard which guides the user through the process of loading/unloading reagents.
	Pause Auto Refresh	Pauses the automatic update of table information and changes the text of the button to Start Auto Refresh. Touch the Start Auto Refresh button to resume the automatic update.
1	Refill	Starts a wizard which guides the user through the process of refilling the Deionized Water and Saline.

Action Button	Name	Description
f	Register OCD Lot	Starts a wizard which guides the user through the process of adding an OCD Lot.
f	Register User Defined	Starts a wizard which guides the user through the process of adding a User Defined Lot.
-	Show Inventory Report	Displays information about the quantity of consumables on-board the system.
-	Show Lot Switch Log	Displays information about the product name, Lot ID, and first use.
-	Show Usage Statistics	Displays information about used/unused consumables. Number of orders failed/finished. Number of tests started/reportable/finished/failed. Number of test result started/indeterminate/finished/failed

TITLE: Ortho Vision [®]	Resource Management and
Daily Quality Control	

UWMC SOP Approval:		
UWMC CLIA Medical Director	Mark H. Wener, MD	Date
Transfusion Service Manager	Nina Sen	Date
Compliance Analyst	Christine Clark	Date
Service Medical Director	Monica Pagano, MD	Date
UWMC Biennial Review:		
		Date