

Uric acid FS* TOOS

Order Information

Cat. No.

1 3001 99 10 920

Kit size

 800 (4 x 200)

Intended Use

Diagnostic reagent for quantitative in vitro determination of uric acid in human serum or heparin plasma on automated respons[®]920.

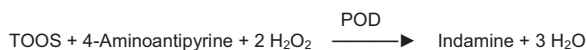
Summary

Uric acid and its salts are end products of the purine metabolism. In gout, the most common complication of hyperuricemia, increased serum levels of uric acid lead to formation of monosodium urate crystals around the joints. Further causes of elevated blood concentrations of uric acid are renal diseases with decreased excretion of waste products, starvation, drug abuse and increased alcohol consume as well as use of certain medicaments [1,2]. Furthermore, increased concentrations of serum uric acid are associated with the development of hypertension, coronary heart diseases, cerebrovascular accidents, and cardiovascular diseases. Additionally, uric acid levels strongly correlate with an increased risk of cardiovascular disease mortality [3]. On the other hand, a lowered uric acid concentration during hospitalization can be utilized as a prognostic indicator and marker of disease severity in severe COVID-19 patients [4].

Method

Enzymatic photometric test using TOOS (N-ethyl-N-(hydroxy-3-sulfopropyl)-m-toluidin)

Uric acid is oxidized to allantoin by uricase. The generated hydrogen peroxide reacts with 4-aminoantipyrine and N-ethyl-N-(hydroxy-3-sulfopropyl)-m-toluidin (TOOS) to a blue violet dye. Ascorbate oxidase avoids interference by ascorbic acid.



Reagents

Components and Concentrations

R1:	Phosphate buffer	pH 7.0	100 mmol/L
	TOOS		1.25 mmol/L
	Ascorbate oxidase		≥ 1.2 kU/L
R2:	Phosphate buffer	pH 7.0	100 mmol/L
	4-Aminoantipyrine		1.5 mmol/L
	K ₄ [Fe(CN) ₆]		50 μmol/L
	Peroxidase (POD)		≥ 5 kU/L
	Uricase		≥ 250 U/L

Storage and Stability

Reagents are stable up to the date of expiry indicated on the kit, if stored at 2 – 8°C and contamination is avoided. Do not freeze and protect from light.

The open-vial stability of the reagent is 9 months until expiry date.

Warnings and Precautions

- The reagents contain sodium azide (0.95 g/L) as preservative. Do not swallow! Avoid contact with skin and mucous membranes.
- The reagents contain material of biological origin. Handle the product as potentially infectious according to universal precautions and good clinical laboratory practice.
- To avoid carryover interference, please take care of efficient washing especially after use of interfering reagents. Please refer to the DiaSys respons[®]920 Carryover Pair Table. Carryover pairs and automated washing steps with the recommended cleaning solution can be specified in the system software. Please refer to the user manual.
- N-acetylcysteine (NAC), acetaminophen and metamizole medication leads to falsely low results in patient samples.
- In very rare cases, samples of patients with gammopathy might give falsified results [5].
- In case of product malfunction or altered appearance that could affect the performance, contact the manufacturer.

- Any serious incident related to the product must be reported to the manufacturer and the competent authority of the Member State where the user and/or patient is located.
- Please refer to the safety data sheets (SDS) and take the necessary precautions for the use of laboratory reagents. For diagnostic purposes, the results should always be assessed with the patient's medical history, clinical examinations and other findings.
- For professional use only.

Waste Management

Refer to local legal requirements for chemical disposal regulations as stated in the relevant SDS to determine the safe disposal.

Warning: Handle waste as potentially biohazardous material. Dispose of waste according to accepted laboratory instructions and procedures.

Reagent Preparation

The reagents are ready to use. The bottles are placed directly into the reagent rotor.

Materials Required

General laboratory equipment

Specimen

Human serum or heparin plasma

Only use suitable tubes or collection containers for specimen collection and preparation.

When using primary tubes, follow the manufacturer's instructions.

Stability [6]:

3 days	at	20 – 25°C
7 days	at	4 – 8°C
6 months	at	-20°C

Only freeze once. Discard contaminated specimens.

Calibrators and Controls

DiaSys TruCal U is recommended for calibration. Calibrator values have been made traceable to the reference method gas chromatography-isotope dilution mass spectrometry (GC-IDMS). Use DiaSys TruLab N and P for internal quality control. All target values of the controls are traceable to DiaSys reagent / calibrator system. Quality control must be performed after calibration. Control intervals and limits have to be adapted to the individual requirements of each laboratory. Results must be within the defined ranges. Follow the relevant legal requirements and guidelines. Each laboratory should establish corrective action in case of deviations in control recovery.

	Cat. No.	Kit size
TruCal U	5 9100 99 10 063	20 x 3 mL
	5 9100 99 10 064	6 x 3 mL
TruLab N	5 9000 99 10 062	20 x 5 mL
	5 9000 99 10 061	6 x 5 mL
TruLab P	5 9050 99 10 062	20 x 5 mL
	5 9050 99 10 061	6 x 5 mL

Performance Characteristics

Measuring range up to 20 mg/dL. In case of higher concentrations re-measure samples after manual dilution with NaCl solution (9 g/L) or use rerun function.	
Limit of detection**	0.1 mg/dL
Onboard stability	6 weeks
Calibration stability	6 weeks

Interference by	Interferences ≤ 10% up to	Analyte concentration [mg/dL]
Ascorbic acid	30 mg/dL	7.95
Bilirubin (conjugated)	12 mg/dL	5.36
Bilirubin (unconjugated)	12 mg/dL	5.50
Hemolysis	400 mg/dL	5.57
Lipemia (triglycerides)	1400 mg/dL	5.57
For further information on interfering substances, refer to the literature [7,8].		

Precision			
Repeatability (n=20)	Sample 1	Sample 2	Sample 3
Mean [mg/dL]	4.00	6.01	9.11
CV [%]	1.39	1.37	1.15
Between day (n=20)	Sample 1	Sample 2	Sample 3
Mean [mg/dL]	3.91	6.06	9.20
CV [%]	2.10	1.24	1.11

Method comparison (n=110)	
Test x	DiaSys Uric acid FS TOOS (Hitachi 917)
Test y	DiaSys Uric acid FS TOOS (respons [®] 920)
Slope	0.997
Intercept	-0.032 mg/dL
Coefficient of correlation	0.997

** lowest measurable concentration which can be distinguished from zero; mean + 3 SD (n = 20) of an analyte free specimen.

Conversion Factor

Uric acid [mg/dL] x 59.48 = Uric acid [μmol/L]

Reference Range

	Female		Male	
	[mg/dL]	[μmol/L]	[mg/dL]	[μmol/L]
Adults [2]	2.3 – 6.1	137 – 363	3.6 – 8.2	214 – 488
Children [9]				
1 – 30 day(s)	1.0 – 4.6	59 – 271	1.2 – 3.9	71 – 230
31 – 365 days	1.1 – 5.4	65 – 319	1.2 – 5.6	71 – 330
1 – 3 year(s)	1.8 – 5.0	106 – 295	2.1 – 5.6	124 – 330
4 – 6 years	2.0 – 5.1	118 – 301	1.8 – 5.5	106 – 325
7 – 9 years	1.8 – 5.5	106 – 325	1.8 – 5.4	106 – 319
10 – 12 years	2.5 – 5.9	148 – 348	2.2 – 5.8	130 – 342
13 – 15 years	2.2 – 6.4	130 – 378	3.1 – 7.0	183 – 413
16 – 18 years	2.4 – 6.6	142 – 389	2.1 – 7.6	124 – 448

Each laboratory should check if the reference ranges are transferable to its own patient population and determine own reference ranges if necessary.

Literature

1. Thomas L. Clinical Laboratory Diagnostics [Internet]. Prof. Lothar Thomas; 2023 [cited 2024 04 09]. Available from: <https://www.clinical-laboratory-diagnostics.com>
2. Newman DJ, Price CP. Renal function and nitrogen metabolites. In: Burtis CA, Ashwood ER, editors. Tietz Textbook of Clinical Chemistry. 3rd ed. Philadelphia: W.B Saunders Company; 1999. p. 1204-70.
3. Rahimi-Sakak, F., Maroofi, M., Rahmani, J, et al. Serum uric acid and risk of cardiovascular mortality: a systematic review and dose-response meta-analysis of cohort studies of over a million participants. BMC Cardiovasc Disord. 2019;19, 218).
4. Li G, Wu X, Zhou C, et al. Uric acid as a prognostic factor and critical marker of COVID-19. Sci Rep. 2021;11:17791.
5. Bakker AJ, Mücke M. Gammopathy interference in clinical chemistry assays: mechanisms, detection and prevention. Clin Chem Lab Med 2007; 45(9):1240-1243.
6. W.G. Guder, F. da Fonseca-Wollheim, W. Heil, et al. Quality of Diagnostic Samples. German Society for Clinical Chemistry and Laboratory Medicine. 3rd completely revised edition 2010.
7. Young DS. Effects of Drugs on Clinical Laboratory Tests. 5th ed. Volume 1 and 2. Washington, DC: The American Association for Clinical Chemistry Press 2000.
8. Young DS. Effects on Clinical Laboratory Tests - Drugs Disease, Herbs & Natural Products, <https://clinf.wiley.com/>

- aaccweb/aacc/, accessed in July 2021. Published by AACC Press and John Wiley and Sons, Inc.
9. Soldin SJ, Brugnara C, Wong EC. Pediatric Reference Intervals, 6th ed. Washington DC; The American Association for Clinical Chemistry Press, 2007; p. 204-5.

Additions and/or changes in the document are highlighted in grey. Deletions are communicated via customer info by stating the edition no. of the package insert/instruction for use.



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* Fluid Stable

Uric acid FS TOOS

Application for serum and plasma

Test Details		Test Volumes		Reference Ranges	
Test	: UA			Auto Rerun	<input type="checkbox"/>
Report Name	: Uric Acid			Online Calibration	<input type="checkbox"/>
Unit	: mg/dL	Decimal Places	: 2	Cuvette Wash	<input type="checkbox"/>
Wavelength-Primary	: 546	Secondary	: 660	Total Reagents	: 2
Assay Type	: 2-Point	Curve Type	: Linear	Reagent R1	: UA R1
M1 Start	: 15	M1 End	: 15	Reagent R2	: UA R2
M2 Start	: 33	M2 End	: 33		
Sample Replicates	: 1	Standard Replicates	: 3	Consumables/Calibrators:	
Control Replicates	: 1	Control Interval	: 0	Blank/Level 0	: 0
Reaction Direction	: Increasing	React. Abs. Limit	: 0.0000	Calibrator Level 1	: *
Prozone Limit %	: 0	Prozone Check	: Lower		
Linearity Limit %	: 0	Delta Abs./Min.	: 0.0000		
Technical Minimum	: 0.10	Technical Maximum	: 20.00		
Y = aX + b	a= : 1.0000	b= : 0.0000			

* Enter calibrator value.

Test Details		Test Volumes		Reference Ranges	
Test	: UA				
Sample Type	: Serum				
Sample Volumes				Sample Types	
Normal	: 3.00 μL	Dilution Ratio	: 1 X	<input checked="" type="checkbox"/> Serum <input type="checkbox"/> Urine <input type="checkbox"/> CSF <input checked="" type="checkbox"/> Plasma <input type="checkbox"/> Whole Blood <input type="checkbox"/> Other	
Increase	: 7.00 μL	Dilution Ratio	: 1 X		
Decrease	: 2.00 μL	Dilution Ratio	: 1 X		
Standard Volume	: 3.00 μL				
Reagent Volumes and Stirrer Speed					
RGT-1 Volume	: 180 μL	R1 Stirrer Speed	: Medium		
RGT-2 Volume	: 45 μL	R2 Stirrer Speed	: High		

Test Details		Test Volumes		Reference Ranges	
Test	: UA				
Sample Type	: Serum				
Reference Range	: DEFAULT				
Category	: Male				
Reference Range				Sample Types	
	Lower Limit		Upper Limit	<input checked="" type="checkbox"/> Serum <input type="checkbox"/> Urine <input type="checkbox"/> CSF <input checked="" type="checkbox"/> Plasma <input type="checkbox"/> Whole Blood <input type="checkbox"/> Other	
	(mg/dL)		(mg/dL)		
Normal	: 3.50		: 7.20		
Panic	: 0.00		: 0.00		