

Total protein FS*

Order Information

Cat. No.

Kit size

Σ/ 800 (4 x 200)

Intended Use

1 2311 99 10 920

Diagnostic reagent for quantitative in vitro determination of total protein in human serum or heparin plasma on automated DiaSys respons®910.

Summary

Measurement of total protein is a useful test in a variety of disorders. Decreased total protein concentrations can be detected in defective protein synthesis in the liver, protein loss due to impaired kidney function, intestinal malabsorption or nutritional deficiency. Elevated protein levels occur in chronic inflammatory disorders, liver cirrhosis and dehydration. [1,2]

Method

Photometric test according to biuret method

Proteins form a violet blue color complex with copper ions in alkaline solution. The absorbance of the color is directly proportional to the concentration

Reagents

Components and Concentrations

R1:	Sodium hydroxide	100 mmol/L
	Potassium sodium tartrate	17 mmol/L
R2:	Sodium hydroxide	500 mmol/L
	Potassium sodium tartrate	80 mmol/L
	Potassium iodide	75 mmol/L
	Copper sulphate	30 mmol/L

Storage and Stability

The reagents are stable up to the date of expiry indicated on the kit, if stored at 2 - 25°C and contamination is avoided. Protect reagents from light

The in-use stability of the reagent is 18 months.

Warnings and Precautions

 Components contained in Total protein FS are classified according to EC regulation 1272//2008 (CLP) as follows:



Reagent 1: Warning. H290 May be corrosive to metals. P234 Keep only in original packaging. P390 Absorb spillage to prevent material damage.



Reagent 2: Warning. Contains Potassium iodide. H290 May be corrosive to metals. H315 Causes skin irritation. H319 Causes serious eye irritation. H373 May cause damage to organs through prolonged or repeated exposure. H412 Harmful to aquatic life with long lasting effects. P234 Keep only in original packaging. P273 Avoid release to the environment. P280 Wear protective gloves/protective clothing/eye protection. P305+P351+P338 IF IN EYES: Rinse cautiously with water for several minutes. Remove contactlenses, if present and easy to do. Continue rinsing. P314 Get medical advice/attention if you feel

- In serum or plasma of patients who have received large intravenous amounts of polydextrans, too high values can be measured with the biuret method. In such cases an alternative method (e.g. Kjeldahl) has to be used.
- 3. In very rare cases, samples of patients with gammopathy might give falsified results [3].
- 4. 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.

7. 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 [4]:

6 days at $20-25^{\circ}$ C 4 weeks at $4-8^{\circ}$ C At least one year 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 biuret method. Use DiaSys TruLab N and P for internal quality control. 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.	Ki	t size	е
TruCal U	5 9100 99 10 063	20	Χ	3 mL
	5 9100 99 10 064	6	Х	3 mL
TruLab N	5 9000 99 10 062	20	Χ	5 mL
	5 9000 99 10 061	6	Х	5 mL
TruLab P	5 9050 99 10 062	20	Χ	5 mL
	5 9050 99 10 061	6	Χ	5 mL

Performance Characteristics

Exemplary data mentioned below may slightly differ in case of deviating measurement conditions.

	Measuring range up to 14 g/dL. In case of higher concentrations re-measure samples aft manual dilution with NaCl solution (9 g/L) or use rerun function		
	Limit of detection**	0.06 g/dL	
Ī	Onboard stability	10 days	
	Calibration stability	7 days	

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Interfering substance	Interferences ≤ 10% up to	Analyte concentration [g/dL]	
Ascorbic acid	30 mg/dL	4.84	
Bilirubin (conjugated)	60 mg/dL	6.28	
	60 mg/dL	7.85	
Bilirubin (unconjugated)	70 mg/dL	6.33	
	70 mg/dL	7.80	
Dextran	2000 mg/dL	5.05	
	2000 mg/dL	6.10	
Hemoglobin	550 mg/dL	6.43	
	550 mg/dL	7.94	
Lipemia (triglycerides)	1000 mg/dL	6.03	
	2000 mg/dL	8.18	
For further information on interfering substances refer to Young DS [5,6].			

Precision				
Within run (n=20)	Sample 1	Sample 2	Sample 3	
Mean [g/dL]	5.27	6.57	11.8	
CV [%]	1.22	0.94	0.83	
Between day (n=20)	Sample 1	Sample 2	Sample 3	
Mean [g/dL]	4.37	7.52	10.5	
CV [%]	1.39	1.13	0.93	

Method comparison (n=130)		
Test x	DiaSys Total protein FS (Hitachi 917)	
Test y	DiaSys Total protein FS (respons®910)	
Slope	0.997	
Intercept	0.208 g/dL	
Coefficient of correlation	0.999	

^{**} according to CLSI document EP17-A, Vol. 24, No. 34

Reference Range [1]

	[g/dL]
Adults	6.6 - 8.8

Children	Female	Male
1 – 30 day(s)	4.2 - 6.2	4.1 - 6.3
1 – 6 month(s)	4.4 - 6.6	4.7 - 6.7
6 months – 1 year	5.6 - 7.9	5.5 - 7.0
1 – 18 year(s)	5.7 - 8.0	5.7 - 8.0

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

Literature

- Thomas L. Clinical Laboratory Diagnostics. 1st ed. Frankfurt: TH-Books Verlagsgesellschaft; 1998. p. 644-7.
- Johnson Am, Rohlfs EM, Silverman LM. Proteins. In: Burtis CA, Ashwood ER, editors. Tietz Textbook of Clinical Chemistry. 3rd ed. Philadelphia: W.B Saunders Company; 1999. p. 477-540.
- Bakker AJ, Mücke M. Gammopathy interference in clinical chemistry assays: mechanisms, detection and prevention. ClinChemLabMed 2007;45(9):1240-1243.
- 4. Guder WG, Zawta B et al. The Quality of Diagnostic Samples. 1st ed. Darmstadt: GIT Verlag; 2001; p. 42-3.
- Young DS. Effects of Drugs on Clinical Laboratory Tests. 5th ed. Volume 1 and 2. Washington, DC: The American Assocation for Clinical Chemistry Press 2000.
- Young DS. Effects on Clinical Laboratory Tests Drugs Disease, Herbs & Natural Products, https://clinfx.wiley.com/ aaccweb/aacc/, accessed in April 2021. Published by AACC Press and John Wiley and Sons, Inc.

Additions and/or changes in the document are highlighted in grey. For deletions, please refer to the customer information for the corresponding edition number of the package inserts.





DiaSys Diagnostic Systems GmbH Alte Strasse 9 65558 Holzheim Germany www.diasys-diagnostics.com

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^{*} Fluid Stable



Total protein FS

Application for serum and plasma samples

This application was set up and evaluated by DiaSys. It is based on the standard equipment at that time and does not apply to any equipment modifications undertaken by unqualified personnel.

Identification	
This method is usable for analysis:	Yes
Twin reaction:	No
Name:	TP
Shortcut:	
Reagent barcode reference:	050
Host reference:	050

Technic	
Type:	End point
First reagent:[µL]	180
Blank reagent	Yes
Sensitive to light	
Second reagent:[µL]	45
Blank reagent	No
Sensitive to light	
Main wavelength:[nm]	546
Secondary wavelength:[nm]	
Polychromatic factor:	
1 st reading time [min:sec]	(04:24)
Last reading time [min:sec]	10:00
Reaction way:	Increasing
Linear Kinetics	
Substrate depletion: Absorbance limit	
Linearity: Maximum deviation [%]	
Fixed Time Kinetics	
Substrate depletion: Absorbance limit	
Endpoint	
Stability: Largest remaining slope	
Prozone Limit [%]	

Reagents	
Decimals	
Units	

Sample	
Diluent	DIL A (NoCl)
Hemolysis:	DIL A (NaCl)
	O (no homelysis)
Agent [µL] Cleaner	0 (no hemolysis)
	0
Sample [µL]	0
Technical limits	
Concentration technical limits-Lower	0.0600
Concentration technical limits-Upper	14.0000
SERUM	
Normal volume [µL]	5.0
Normal dilution (factor)	1
Below normal volume [µL]	
Below normal dilution (factor)	
Above normal volume [µL]	5.0
Above normal dilution (factor)	6
URINE	
Normal volume [µL]	5.0
Normal dilution (factor)	1
Below normal volume [µL]	
Below normal dilution (factor)	
Above normal volume [µL]	5.0
Above normal dilution (factor)	6
PLASMA	
Normal volume [µL]	5.0
Normal dilution (factor)	1
Below normal volume [µL]	
Below normal dilution (factor)	
Above normal volume [µL]	5.0
Above normal dilution (factor)	6
CSF	
Normal volume [µL]	5.0
Normal dilution (factor)	1
Below normal volume[μL]	
Below normal dilution (factor)	
Above normal volume [µL]	5.0
Above normal dilution (factor)	6
Whole blood	
Normal volume [µL]	5.0
Normal dilution (factor)	1
Below normal volume[μL]	
Below normal dilution (factor)	
Above normal volume [µL]	5.0
Above normal dilution (factor)	6

Results	
Decimals	2
Units	g/dL
Correlation factor-Offset	0.0000
Correlation factor-Slope	1.0000

Range	
Gender	All
Age	
SERUM	>=6.60 <=8.80
URINE	
PLASMA	>=6.60 <=8.80
CSF	
Whole blood	
Gender	
Age	
SERUM	
URINE	
PLASMA	
CSF	
Whole blood	

Contaminants	
Please refer to r910 Carryover Pair Table	

Calibrators details	
Calibrator list	Concentration
Cal. 1/Blank	0
Cal. 2	*
Cal. 3	
Cal. 4	
Cal. 5	
Cal. 6	
	Max delta abs.
Cal. 1	0.002
Cal. 2	0.020
Cal. 3	
Cal. 4	
Cal. 5	
Cal. 6	
Drift limit [%]	0.80

Calculations		
Model	X	
Degree	1	

^{*} Enter calibrator value

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