

Glucose GOD FS*

Order Information

Cat. No.

Kit size

1 2500 99 10 923

 $\overline{\Sigma}$ 800 (4 x 200)

Intended Use

Diagnostic reagent for quantitative in vitro determination of glucose in human serum or heparin plasma on automated respons®920.

Summary

Glucose is a monosaccharide and one of the most important carbohydrates for the human organism, as it is a metabolic substrate and a source of energy. The glucose concentration in blood is kept constant by several regulatory mechanisms. The main regulation occurs via secretion of insulin and glucagon. Primarily for the organism, the coverage of the steady glucose demand of the central nervous system with only minimal glucose reserves and the demand of erythrocytes is of major importance [1]. Glucose concentration in blood depends on nutritional status of an individual. Three conditions can be distinguished: Fasting status (8-10 h after the last nutritional intake), postprandial status (2-3 h after beginning of food intake) and postabsorptive status (6-12 h after beginning of food intake) [2]. Glucose measurement is recommended, whenever hypo- or hyperglycemia is suspected. Altered glucose can be the cause of many medical conditions. The main diseases causing elevated blood glucose levels are the different types of diabetes mellitus (DM). The primary purpose of glucose measurement is to diagnose DM respectively to define and monitor therapeutic interventions [2].

Method

"GOD-PAP": enzymatic photometric test

Determination of glucose after enzymatic oxidation by glucose oxidase. The colorimetric indicator is quinoneimine, which is generated from 4-aminoantipyrine and phenol by hydrogen peroxide under the catalytic action of peroxidase (Trinder's reaction) [3].

2 H₂O₂ + 4-Aminoantipyrine + Phenol — ▶ Quinoneimine + 4 H₂O

Reagents

Components and Concentrations

Phosphate buffer	pH 7.5	250 mmol/L
Phenol		5 mmol/L
4-Aminoantipyrine		0.5 mmol/L
Glucose oxidase	(GOD)	≥ 10 kU/L
Peroxidase	(POD)	≥ 1 kU/L

Storage and Stability

Reagent is 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 18 months until expiry date.

Warnings and Precautions

- The reagent contains sodium azide (0.95 g/L) as preservative.
 Do not swallow! Avoid contact with skin and mucous membranes.
- The reagent contains material of biological origin. Handle the product as potentially infectious according to universal precautions and good clinical laboratory practice.
- 3. In very rare cases, samples of patients with gammopathy might give falsified results [4].
- 4. N-acetylcysteine (NAC), acetaminophen and metamizole medication leads to falsely low results in patient samples.
- 5. 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.
- 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.
- 9. 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 reagent is 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.

Separate at the latest 1h after blood collection from cellular contents.

Stability in serum/plasma after addition of a glycolytic inhibitor (fluoride, monoiodacetate, mannose) [5]:

2 days at 20 – 25°C
7 days at 4 – 8°C
1 day at -20°C

Only freeze once. Discard contaminated specimens.

Stability in serum (separated from cellular contents, hemolysis free) without adding a glycolytic inhibitor [6,7]:

8 h at 25°C 72 h at 4°C 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. 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	Э
TruCal U	5 9100 99 10 063	20	Х	3 mL
	5 9100 99 10 064	6	Х	3 mL
TruLab N	5 9000 99 10 062	20	Х	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	Х	5 mL

Performance Characteristics

Calibration stability

Measuring range up to 400 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** 1 mg/dL		
Onboard stability	4 weeks	

4 weeks



Interference by	Interferences ≤ 10% up to	Analyte concentration [mg/dL]
Ascorbic acid	18 mg/dL	183
Bilirubin (conjugated)	36 mg/dL	170
Bilirubin (unconjugated)	24 mg/dL	174
Hemolysis	700 mg/dL	84.0
Lipemia (triglycerides)	2000 mg/dL	126

For further information on interfering substances, refer to the literature [8-10].

Precision			
Repeatability (n=20)	Sample 1	Sample 2	Sample 3
Mean [mg/dL]	53.4	97.7	307
CV [%]	0.839	0.932	0.722
Between day (n=20)	Sample 1	Sample 2	Sample 3
Mean [mg/dL]	53.5	93.0	296
CV [%]	1.74	2.25	1.23

Method comparison (n=110)		
Test x	DiaSys Glucose GOD FS (Hitachi 917)	
Test y	DiaSys Glucose GOD FS (respons®920)	
Slope	0.994	
Intercept	0.129 mg/dL	
Coefficient of correlation	0.998	

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

Conversion Factor

Glucose [mg/dL] x 0.05551 = Glucose [mmol/L]

Reference Range [2]

	[mg/dL]	[mmol/L]
Newborns	. 0 .	
Cord blood	63 – 158	3.5 - 8.8
1 h	36 - 99	2.0 - 5.5
2 h	39 - 89	2.2 - 4.9
5 – 14 h	34 - 77	1.9 - 4.3
20 – 28 h	46 – 81	2.6 - 4.5
44 – 52 h	48 – 79	2.7 - 4.4
Children (fasting)	60 - 99	3.3 - 5.5
Adults (fasting)	60 - 95	3.3 - 5.3

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

Literature

- Hallbach J. Klinische Chemie und Hämatologie Biomedizinische Analytik für MTLA und Studium. 3rd ed. Stuttgart: Georg Thieme Verlag KG; 2011. p. 170-171.
- Thomas L. Clinical Laboratory Diagnostics [Internet]. Prof. Lothar Thomas; 2023 [cited 2023 Nov 21]. Available from: https://www.clinical-laboratory-diagnostics.com/
- Barham D, Trinder P. An improved color reagent for the determination of blood glucose by the oxidase system. Analyst 1972: 97: 142-5.
- Bakker AJ, Mücke M. Gammopathy interference in clinical chemistry assays: mechanisms, detection and prevention. ClinChemLabMed 2007;45(9):1240-1243.
- Guder WG et al. Die Qualität diagnostischer Proben Empfehlung der Arbeitsgruppe Präanalytik der Deutschen Vereinten Gesellschaft für Klinische Chemie und Laboratoriumsmedizin. 7th ed. Heidelberg: BD Diagnostics Preanalytical Systems; 2012. p. 46-47, p. 68-69.
- Sacks DB. Carbohydrates. In: Burtis CA, Ashwood ER, Bruns DE, editors. Tietz Textbook of Clinical Chemistry and Molecular Diagnosis. 4th ed. St. Louis, Missouri: Elsevier Saunders Company; 2006. p. 837-901.
- Sacks DB, Bruns DE, Goldstein DE, MacLaren NK, McDonald JM, Parrott M. Guidelines and Recommendations for Laboratory Analysis in the Diagnosis and Management of Diabetes Mellitus. ClinChem 2002; 48: 436-472.

- 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.
- Young DS. Effects on Clinical Laboratory Tests Drugs Disease, Herbs & Natural Products, https://clinfx.wiley.com/ aaccweb/aacc/, accessed in February 2024. Published by AACC Press and John Wiley and Sons, Inc.
- Sonntag O, Scholer A. Drug interference in clinical chemistry: recommendation of drugs and their concentrations to be used in drug interference studies. Ann Clin Biochem. 2001 Jul;38:376-85.

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.





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

* Fluid Stable



Glucose GOD FS

Application for serum and plasma

Test D	etails	Test Volumes	Reference Ranges
Test	: GLUC		Auto Rerun □
Report Name	: Glucose		Online Calibration
Unit	: mg/dL	Decimal Places : 1	Cuvette Wash □
Wavelength-Primary	: 505	Secondary : 700	Total Reagents : 1
Assay Type	: 1-Point	Curve Type : Linear	Reagent R1 : GLUC R1
M1 Start	: 0	M1 End : 0	Reagent 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 : 0.00	Calibrator 1 *
Prozone Limit %	: 0	Prozone Check : Lower	
Linearity Limit %	: 0	Delta Abs./Min. : 0.00	
Technical Minimum	: 1.00	Technical Maximum : 400.00	
Y = aX + b $a=$: 1.00	b= : 0.00	
Enter calibrator value.			
Test D	etails	Test Volumes	Reference Ranges
Test	: GLUC		
Sample Type	: Serum		
	Sampl	e Volumes	Sample Types
Normal	: 2.00 μL	Dilution Ratio : 1 X	☑ Serum □ Urine
Increase	: 4.00 µL	Dilution Ratio : 1 X	□ CSF ☑ Plasma
Decrease	: 2.00 μL	Dilution Ratio : 2 X	☐ Whole Blood ☐ Other
Standard Volume	: 2.00 µL		
Reagent Volumes and Stirrer Speed		=	
RGT-1 Volume	: 180 µL	R1 Stirrer Speed : High	
RGT-2 Volume	: µL	R2 Stirrer Speed :	
Test D	etails	Test Volumes	Reference Ranges
Test	: GLUC	rost volumes	Reference Ranges
Sample Type	: Serum		
Campio Type			
Reference Range	: DEFAULT		
Category	: Male		
	Refere	nce Range	Sample Types
	Lower Limit	Upper Limit	☑ Serum □ Urine
	(mg/dL)	(mg/dL)	□ CSF ☑ Plasma
Normal	:	70.00 115.00	☐ Whole Blood ☐ Other
Panic	:	0.00	
			_