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MANUFACTURER: BIOLABO SAS. Les Hautes Rives 02160, Maizy, France

CALCIUM Arsenazo III Method

Reagent for quantitative determination of calcium in human serum and plasma or urines.

I: corresponds to significant modifications

REF K1004 **R1** 4 x 17 mL **REF** K2004 R1 4 x 25 mL



IVD

Made In France

TECHNICAL SUPPORT AND ORDERS

Tel: (33) 03 23 25 15 50

support@biolabo.fr

Latest revision: www.biolabo.fr

I INTENDED USE

This reagent is designated for professional use in laboratory (automated method)

It allows the quantification of calcium in human serum and plasma or urines to assess calcium homeostasis.

GENERALITIES (1) (2)

Calcium fulfils a variety of roles in human physiology, not only as a structural factor in bones and teeth, but also in normal neuromuscular function and clotting of blood.

The level of serum calcium may be affected by intestinal malabsorption, by alterations in plasma proteins level, especially albumin, which should be measured concurrently with calcium.

Hypercalcemia is found in hyperparathyroidism, multiple myeloma, bone and parathyroïdal neoplasms and in states with bones demineralization.

Hypocalcemia is encountered in hypoparathyroidism and in several cases of necrosis and acute pancreatitis.

PRINCIPLE (4)

At mildly acidic pH, metallo-chromogen Arsenazo III combines with calcium to form a colored complex which absorbance measured at 650 nm (640-660) is proportional to the amount of calcium in the specimen.

REAGENTS R1 C A A

R1	CAA	Arse	Arsenazo III Reager		
Imidazole buffer pH 6.8 at 25			> 90	mmol/L	
Arse	nazo III		> 0.18	mmol/L	

Arsenazo III Surfactant 0.1 Preservative

Danger Repro. 1B: H360 - May damage fertility or the unborn child

%

P201: Obtain special instructions before use,

P202: Do not handle until all safety precautions have been read and understood.

P280 Wear protective gloves/protective clothing/eye protection/face protection.

P308+P313: IF exposed or concerned: Get medical advice/attention, P405: Store locked up,

P501: Dispose of contents/container in accordance with dangerous goods regulation. Classification due to: Imidazole < 1%

For more details, refer to Safety Data Sheet (MSDS)

SAFETY CAUTIONS

- Refer to current Material Safety Data Sheet available on request or on www.biolabo.fr
- Verify the integrity of the contents before use.
- Waste disposal: Respect legislation in force in the country.
- All specimens or reagents of biological origin should be handled as potentially infectious. Respect legislation in force in the country.

Any serious incident that has occurred in connection with the device is notified to the manufacturer and the competent authority of the Member State in which the user and/or patient is based.

REAGENT PREPARATION

Ready for use.

STABILITY AND STORAGE

Stored away from light, well cap in the original vial at 18-25°C, reagents are stable when stored and used as described in the insert:

Unopened.

- Until the expiry date stated on the label of the Kit.
- Once opened:
- · Reagent is stable at least 3 months.

Discard any reagent if cloudy or if absorbance > 0.900 at 620 nm.

SPECIMEN COLLECTION AND HANDLING (1) (2)

Serum or heparinized plasma:

Do not use citrate, oxalate or EDTA. Blood obtained on fasting patient with minimal venous occlusion and without exercise or after restoring circulation at least for 1 minute.

24 h Urines:

Acidify after collection with 20 to 30 mL HCl 6 N to dissolve calcium salts

Dilute (1 + 2) with distilled water before performing the test.

- Total calcium is stable in serum for:
- at least 7 days at 2-8°C.
- 6 months at -20°C.

Long-term freezing may lead to associated evaporation, lyophilization or co precipitation with fibrin (i.e. heparinized plasma) or lipids.

LIMITS (3)

Handle with care specimens, calibrators and controls to avoid contamination by environmental calcium. Use disposable tubes and cuvettes and clean glassware with HCl 0.1N, well rinse with demineralized water.

Plastic and glass containers may adsorb calcium during storage, especially with diluted solution.

For more comprehensive review of factors affecting this assay refer to the publication of Young D.S.

MATERIAL REQUIRED BUT NOT PROVIDED

- 1. Basic medical analysis laboratory equipment.
- 2. Biochemistry Clinical Analyzer Kenza One, Kenza 240TX/ISE or Kenza 450TX/ISE

REFERENCE INTERVALS (2)

Total calcium In serum or plasma	mg/dL	mmol/L			
Premature	6.2-11.0	[1.55-2.75]			
0-10 days	7.6-10.4	[1.90-2.60]			
10 days –24 months	9.0-11.0	[2.25-2.75]			
24 months –12 years	8.8-10.8	[2.20-2.70]			
12 years -18 years	8.4-10.2	[2.10-2.55]			
18-60 years	8.6-10.0	[2.15-2.50]			
60-90 years	8.8-10.2	[2.20-2.55]			
> 90 years	8.2-9.6	[2.05-2.40]			
Total calcium in 24 h urines :					

< 300 mg/24 h (< 7,5 mmol/24 h).

Each laboratory should establish its own normal ranges for the population that it serves.

PERFORMANCES

On Kenza 240TX, 37°C, 620 nm, with serum as specimen

Linearity Range: between 6 and 20 mg/dL

Detection limit: approx. 0.01 mg/dL

Precision:

Within-run N = 20	Low level	Normal level	High level	Between run N = 20	Low level	Normal level	High Ievel
Mean (mg/dL)	6.09	9.43	12.36	Mean (mg/dL)	6.09	9.64	12.05
S.D. mg/dL	0.05	0.05	0.10	S.D. mg/dL	0.09	0.15	0.22
C.V. %	0.8	0.5	0.8	C.V. %	1.5	1.5	1.8

Comparison studies with commercially available reagent: Realized on serum specimens (n=53) between 4.76 and 13.8 mg/dL

y = 1.0084x -0.03672 R= 0.9955

Analytical Sensitivity: approx. 0.054 abs for 1 mg/dL

Interferences:

Turbidity	Positive interference from 0.043 OD		
Total bilirubin	Positive interference from 238 µmol/L		
Direct bilirubin	No interference up to 406 µmol/L		
Ascorbic acid	No interference up to 2500 mg/dL		
Glucose	No interference up to 1089 mg/dL		
Hemoglobin	Positive interference from 157 µmol/L		

Other substances may interfere (see § Limits)

On the board stability: 2 months

Calibration Stability: 2 months

Make a new calibration when changing reagent batch, if quality control results are found out of the established range and after maintenance operations

Performances and stability data on Kenza 450TX/ISE and Kenza One are available on request.

CALIBRATION (5)

• REF 95015 Multicalibrator traceable to SRM 909

The calibration frequency depends on proper instrument functions and on the preservation of the reagent.

QUALITY CONTROL

- REF 95010 EXATROL-N Level I •
- REF 95011 EXATROL-P Level II
- REF 95012 Urinary controls
- External quality control program
- It is recommended to control in the following cases:
- At least once a run.
- At least once within 24 hours.
- · When changing vial of reagent.
- After maintenance operations on the instrument.
- If control is out of range, apply following actions:
- 1. Prepare a fresh control serum and repeat the test
- 2. If control is still out of range, use a new vial of fresh calibrator
- 3. If control is still out of range, use a new vial of reagent and reassay
- If control is still out of range, please contact BIOLABO technical support or your local Agent.

PROCEDURE

Refer to specific application for specimen assayed on Kenza Analyzer Contact support@biolabo.fr for more details

CALCULATION

The analyzer provides directly final result. Refer to the user's manual of Kenza analyzer.

REFERENCES

- TIETZ N.W. Text book of clinical chemistry, 3rd Ed. C.A. Burtis, E.R. (1) Ashwood, W.B. Saunders (1999) p. 1395-1406, p.1435-1439. Clinical Guide to Laboratory Test, 4th Ed., N.W. TIETZ (2006) p. 202-207
- (2)
- (3) YOUNG D.S., Effect of Drugs on Clinical laboratory Tests, 4th Ed. (1995) p. 3-115 à 3-125
- (4) BAUER J. P., Affinity and stoichiometry of calcium binding Arsenazo III, Anal. Biol. Chem.(1981), 110, p.61-72
- SRM: Standard Reference Material ® (5)

	Σ	IVD	X	H ₂ O	₩
Manufacturer	Expiry date	In vitro diagnostic	Storage temperature	Dematerialized water	Biological risk
REF	- li	LOT	×	Σ	\rightarrow
Product Reference	See Insert	Batch number	Store away from light	Sufficient for	Dilute with