Getein Biotech, Inc.

CE

NT-proBNP Fast Test Kit (Immunofluorescence Assay)
For *in vitro* Diagnostic Use

User Manual

INTENDED USE

NT-proBNP Fast Test Kit (Immunofluorescence Assay) is intended for *in vitro* quantitative determination of N-terminal B-type natriuretic peptide precursor (NT-proBNP) in serum, plasma or whole blood. This test is used as an aid in the clinical diagnosis, prognosis and evaluation of Heart Failure (HF).

SUMMARY

N-terminal B-type natriuretic peptide precursor (NT-proBNP) is secreted from the left cardiac ventricle in response to volume and pressure overload. It's an inactive N-terminal fragment that split from BNP prohormone. NT-proBNP can be used to evaluate heart contractile, diastolic dysfunction, and ventricular segmental wall motion coordination. Besides, it has high sensitivity and negative predictive value (>97%). As a gold standard recommended by the European Society of Cardiology, American Heart Association, and American College of Cardiology for the diagnosis and prognosis of heart failure, NT-proBNP is used to indicate heart failure patient at the early stage, determine HF risk levels, monitor medical efficiency of HF drug, evaluate prognosis of HF patient and to distinguish dyspnea that caused by HF from other diseases. Furthermore, NT-proBNP is a risk assessment indicator for Acute Coronary Syndrome.

PRINCIPLE

The test uses an anti-human NT-proBNP monoclonal antibody conjugated with fluorescence latex and an anti-human NT-proBNP polyclonal antibody coated on the test line. After the sample has been applied to the test strip, the fluorescence latex-labelled anti-human NT-proBNP monoclonal antibody binds with the NT-proBNP in sample and forms a marked antigen-antibody complex. This complex moves to the test card detection zone by capillary action. Then marked antigen-antibody complex is captured on the test line by the anti-human NT-proBNP polyclonal antibody. The fluorescence intensity of the test line increases in proportion to the amount of NT-proBNP in sample.
Then insert test card into Getein1100 Immunofluorescence Quantitative Analyzer (hereafter referred to as Getein1100), the concentration of NT-proBNP in sample will be determined and displayed on the screen. The value will be stored in Getein1100 and available for downloading. The result can be easily transmitted to the laboratory or hospital information system.

CONTENTS

A kit contains:

1. Getein NT-proBNP test card in a sealed pouch with desiccant……25
2. Disposable pipet……25
3. User manual ……1
4. SD card ……1
5. Blood sample diluent……1

A test card consists of:
A plastic shell and a reagent strip which is composed of a sample pad, nitrocellulose membrane (one end of the membrane is coated with a fluorescence latex-labelled anti-human NT-proBNP monoclonal antibody, the test line is coated with another anti-human NT-proBNP polyclonal antibody and the control line is coated with rabbit anti-mouse IgG antibody), absorbent paper and liner.
Blood sample diluent:
Phosphate buffered saline, proteins, detergent, preservative, stabilizer.

Note: Components from different batches must not be interchanged.

APPLICABLE DEVICE

Getein1100 Immunofluorescence Quantitative Analyzer

STORAGE AND STABILITY

Store the test card at 4~30°C with a valid period of 24 months.
Use the test card within 1 hour once the foil pouch is opened.
Store the blood sample diluent at 0~30°C with a valid period of 24 months.
Store the blood sample diluent at 2~8°C for better results.

PRECAUTIONS

1. For *in vitro* diagnostic use only.
2. For professional use only.
3. Do not use the kit beyond the expiration date.
4. Do not use the test card if the foil pouch is damaged.
5. Do not open pouches until ready to perform the test.
6. Do not reuse the test card.
7. Do not reuse the pipet.
8. Handle all specimens as potentially infectious. Proper handling and disposal methods should be followed in accordance with local regulations.
9. Carefully read and follow the manual to ensure proper test performance.

SPECIMEN COLLECTION AND PREPARATION

1. This test can be used for serum, plasma and whole blood samples. Heparin should be used as the anticoagulant for plasma and whole blood. Samples should be free of hemolysis.
2. Suggest to use serum or plasma for better results.
3. Serum or plasma can be used directly. For whole blood sample, one drop of blood sample diluent must be added before testing.
4. If testing will be delayed, serum and plasma samples may be stored up to 1 day at 2~8°C or stored at -20°C for 3 months prior to being tested (whole blood sample may be stored up to 3 days at 2~8°C).
5. Refrigerated or frozen sample should reach room temperature and be homogeneous prior to testing. Avoid multiple freeze-thaw cycles.
6. Do not use heat-inactivated samples.
7. SAMPLE VOLUME: 100 µl.

TEST PROCEDURE

1. Collect specimen according to manual.
2. Test card, sample and reagent should be brought to room temperature prior to testing.
3. Confirm SD card lot No. in accordance with test kit lot No.. Perform “SD Card Calib” calibration when necessary (Details refer to 8.5.2 of Getein1100 User Manual).
4. On the main interface of Getein1100, press "ENT" button to enter testing interface.
5. Remove the test card from the sealed pouch immediately before use. Label the test card with patient or control identification.
6. Put the test card on a clean table, horizontally placed.
7. Using sample transfer pipette, deliver 100 µl of sample (or 3-4 drops of sample when using disposable pipet) into the sample port on the test card (for whole blood sample, one drop of blood sample diluent must be added after loading 100 µl sample on the test card).
8. After 10 minutes, insert the test card into Getein1100 and press "ENT" button. The result will be shown on the screen and printed automatically.

Notes:

1. It is required to perform “SD Card Calib” calibration when using a new batch of kit.
2. It is suggested to calibrate once for one batch of kit.
3. Make sure the test card insertion is correct and complete.

TEST RESULTS

Getein1100 can scan the test card automatically and display the result on the screen. Please follow the procedure in user manual of Getein1100 for result printing.
For additional information, please refer to the user manual of Getein1100.

EXPECTED VALUE

The expected normal value for NT-proBNP was determined by testing samples from 2,500 apparently healthy individuals. The 95th percentile of the concentration for NT-proBNP is 185 pg/ml and the 97.5th percentile of the concentration for NT-proBNP is 300 pg/ml. Because of the apparent difference of the concentration of NT-proBNP among different age groups, the reference values of the NT-proBNP are reported in groups. Details refer to Table 1. Clinical diagnosis value: refer to Roche criterion, details see Table 2.

Table 1 NT-proBNP reference value

Age / Percentile	≤44	45-54	55-64	65-74	≥75	Statistic analysis
95	98.5	130	215	290	530	185
97.5	116	170	270	350	740	300

Table 2 Standard of excluding/diagnosing HF by NT-proBNP

Age	<50	50-75	≥75	Diagnosis of HF
NT-proBNP (pg/ml)	≥450	≥900	≥1800	High probability of HF
	300-450	300-900	300-1800	Low probability of HF, need to combine with other clinical evaluation
	<300	<300	<300	Exclude HF

It is recommended that each laboratory establish its own expected values for the population it serves.

PERFORMANCE CHARACTERISTICS

Measuring Range: 100~35000 pg/ml.
Lower Detection Limit: ≤100 pg/ml.
Within-Run Precision: ≤10%
Between-Run Precision: ≤15%

LIMITATIONS

1. As with all diagnostic tests, a definitive clinical diagnosis should not be made based on the result of a single test. The test results should be interpreted considering all other test results and clinical information such as clinical signs and symptoms.
2. Samples containing interferents may influence the results. The table below listed the maximum allowance of these potential interferents

Interferent	Concentration (Max)
Hemoglobin	5 g/L
Triglyceride	10 g/L
Bilirubin	0.2 g/L

REFERENCES

1. de Lemos JA, McGuire DK, Drazner MH. B-type natriuretic peptide in cardiovascular disease. Lancet 2003; 362: 316~322.
2. Pfister R, Scholz M, Wielckens K, Erdmann E, Schneider CA. The value of natriuretic peptides NT-pro-BNP and BNP for the assessment of left-ventricular volume and function. A prospective study of 150 patients. Deutsche medizinische Wochenschrift (1946) 2002; 127(49):2605.
3. EN ISO 18113-1:2009 In vitro diagnostic medical devices - Information supplied by the manufacturer (labelling) - Part 1: Terms, definitions and general requirements.
4. EN ISO 18113-2:2009 In vitro diagnostic medical devices - Information supplied by the manufacturer (labelling) - Part 2: In vitro diagnostic reagents for professional use (ISO 18113-2:2009).

DESCRIPTION OF SYMBOLS USED

The following graphical symbols used in or found on NT-proBNP Fast Test Kit (Immunofluorescence Assay) are the most common ones appearing on medical devices and their packaging. They are explained in more detail in the European Standard EN 980: 2008 and International Standard ISO 15223-1:2007.

Key to symbols used			
	Manufacturer		Expiration Date
	Do not re-use		Date of manufacture
	Consult instructions for use	LOT	Batch code
	Temperature limitation	IVD	*In vitro* diagnostic medical device
	Sufficient for	EC REP	Authorized representative in the European Community
CE	CE marking		

Thank you for purchasing NT-proBNP Fast Test Kit (Immunofluorescence Assay).
Please read this manual carefully before operating to ensure proper use.
Version: WIF-DLSM-02-01

Getein Biotech, Inc.
Add: No.9 Bofu Road, Luhe District, 211505 Nanjing, China
Tel: +86-25-68568508
Fax: +86-25-68568500
E-mail: tech@getein.com.cn overseas@getein.com.cn
Website: http://www.bio-gp.com.cn