

Calcium Test Kit Arsenazo III

Quantitative determination of Calcium in human Serum / Plasma / other body fluids

Only for In Vitro Diagnostic use

ORDER INFORMATION

REF	Pack Size
CALMONO 25	25 X 1 ml
CALMONO 50	50 X 1 ml
CAL 25	1 X 25 ml
CAL 50	1 X 50 ml
CAL 100	1 X 100 ml
CAL 1000	1 X 1000 ml
CAL 5000	1 X 5000 ml
CAL 10000	1 X 10000 ml

CLINICAL SIGNIFICANCE

Calcium is the most abundant and one of the most important minerals in the human body. Approximately 99% of body calcium is found in bones. A decrease in albumin level causes a decrease in serum calcium. Low levels of calcium are found in hypoparathyroidism, pseudohypoparathyroidism, vitamin D deficiency, malnutrition and intestinal malabsorption. Among causes of hypercalcemia are cancers, large intake of vitamin D, enhanced renal retention, osteoporosis, sarcosidosis, thyrotoxicosis, hyperparathyroidism, multiple myeloma, idiopathic hypercalcemia of infancy, and carcinoma metastasic to bone. Elevated calcium concentration in urine is found in nephrolithiasis and metabolic acidosis.

Method

Photometric test using arsenazo III

Calcium with Arsenazo III (1, 8-Dihydroxy-3,6-disulpho-2,7-naphthalene-bis (azo)-dibenzenearsonic acid), at neutral pH, yields a blue colored complex. The intensity of the colour formed is proportional to the calcium concentration in the sample.

REAGENT

Reagent 1 : Arsenazo III Reagent

Calcium Std. : 10 mg/dL

REAGENT PREPARATION

The Reagent is ready to use.

REAGENT STORAGE AND STABILITY

Reagent is stable till expiry when stored at 2-8°C. Store protected from light.

WARNING AND PRECAUTIONS

- For in vitro diagnostic use.
- Do not use components beyond the expiration date.
- Do not mix materials from different kit lot numbers.
- Exercise the normal precautions required for handling all laboratory
- The reagent contains preservative. Do not swallow. Avoid contact with skin and mucous membranes.
- For detailed information refer Material Safety Data Sheet.
- Proceed carefully with this product because due to its nature it can get contaminated easily.
- Most of the detergents and water softening products used in the laboratories contain chelating agents. A defective rinsing will invalidate the procedure.

WASTE MANAGEMENT

Please refer to local legal requirements.

MATERIALS REQUIRED BUT NOT PROVIDED

- NaCl solution 9 g/L
- General laboratory equipment

SAMPLE COLLECTION AND PRESERVATION

Serum, heparin plasma or urine

Do not use EDTA plasma.

Stability

in Serum/Plasma: 3 weeks at 4 - 8°C

8 months at -20°C

in Urine: 1 day at 20 - 25°C

4 days at $4 - 8^{\circ}$ C

3 weeks at -20°C

Add 10 mL of concentrated HCl to 24 h urine and heat the

specimen to dissolve calcium oxalate.

Discard contaminated specimens. Freeze only once!

ASSAY PROCEDURE

Operating Instructions

- Check reagent inventories at least daily to ensure that quantities are sufficient for the planned work load.
- Bring all reagents, standard and samples to room temperature 18 28°C, prior to analysis.

AUTOMATED PARAMETE	RS
Wavelength	650 nm (620 – 650 nm)
Measurement	Against Reagent blank
Reaction Temperature	RT (22-30°C)
Reaction Type	End Point
Reaction Direction	Increasing
Incubation	5 Min.
Sample Volume	25 μL
Reagent I Volume	1000 μL
Blank Absorbance Limit	< 0.80
Units	mg/dL

MANUAL ASSAY PROCEDURE

	Blank	Standard	Test
Reagent 1	1000μL	1000μL	1000μL
tandard		25μL	
Sample			25μL

- Mix Well & Incubate it for 5 minutes at RT (22-30°C)
- Read and record absorbance of the reagent blank, standard, Control and each unknown sample immediately.

SAMPLE DILUTIONS

- This method is linear upto a concentration of 16 mg/dL.
- Dilute samples above this concentration 1:1 with DI Water and
- Repeat assay. Multiply the result by 2.

CALCULATION

(Ac) Sample
Serum/Plasma =x 10 (Standard concentration.)
(As) Standard
(Ac) Sample
Urine 24Hr. =x 10 x vol. (dL) urine/24 h x 2
(As) Standard

CLIBRATORS AND CONTROLS

For the calibration of automated photometric systems the commercially available suitable multi-calibrator is recommended.





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This method has been standardized against the reference method Atomic Absorption Spectrometry (AAS).

It is recommended to run a normal and a pathological control serum which is commercially available to verify the performance of the measured procedure. The value of controls should fall within the established limit.

Each laboratory should establish corrective action in case of deviations in control recovery.

PERFORMANCE CHARACTERISTICS

WITHIN RUN

Sample	Mean Concentration	SD	CV %
Randox 2	8.44	0.19	2.30%
Randox 3	12.67	0.20	1.56%

RUN TO RUN

Sample	Mean Concentration	SD	CV %
Randox 2	8.55	0.10	1.21%
Randox 3	12.55	0.29	2.27%

LINEARITY

This method is linear upto a concentration of 16 mg/dL. Dilute samples above this concentration 1:1 with DI Water and Repeat assay. Multiply the result by 2.

Limit of detection: The limit of detection for Calcium is 0.04 mg/dl.

METHOD COMPARISON

A comparison of Calcium with a commercially available assay (x) using 59 samples gave following results: $R^2=0.9500$.

REFERENCE VALUES

Serum:	8.8 - 10.2 mg/dl	= 2.2 - 2.55 mmol/L
Urine:	100 - 300 mg/24 h	= 2.5 - 7.5 mmol/24 h

The reference values are to be considered as indicative only. Every laboratory should establish its own normal range.

LIMITATION OF THE PROCEDURE

 For diagnostic purposes, the results should always be assessed in conjunction with the patient's medical history, clinical examination and other findings.

INTERFERENCE

- Bilirubin: No interference found upto 50mg/dl.
- Hemoglobin: : No interference found upto 450 mg/dL.
- Lipemia: Lipids interferences are possible at 660 nm single wavelength, try using bi-chromatic wavelength 660/700 nm to avoid interferences.
- These characteristics have been obtained using an automatic analyzer.
 Results may vary if a different instrument or a manual procedure is used.

BIBLIOGRAPHY

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GLOSSARY OF SYMBOL

Ţ <u>i</u>	Consult Instruction for Use
REF	Catalog Number
	Store between
	Manufacturer
*	Keep away from sunlight



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