

Potassium Single Reagent

REF: 298 001 (2 x 25ml) 50 test REF: 298 002 (4 x 25ml) 100 test REF: 298 003 (2 x 100ml) 200 test REF: 298 004 (4 x 100ml) 400 test

Intended Use

Spectrum-Diagnostics Potassium reagent is intended for the in-vitro quantitative diagnostic estimation of potassium in human serum or Plasma on manual systems.

Background

Sodium and Potassium are the major cations of extracellular and intracellular fluids respectively. Sodium maintains the normal distribution of water and the osmotic pressure in the various fluid compartments. Potassium influences the acid base balance and osmotic pressure including water retention. Increased sodium levels are found in severe dehydration and excessive treatment with sodium salts. Decreased levels are found in severe polyurea, metabolic acidosis, diarrhea and renal insufficiency. Increased potassium levels are found in renal failure, dehydration, shock and adrenal insufficiency. Decreased levels are found in malnutrition, gastrointestinal fluid loss, and hyperactivity of the adrenal cortex.

Method

Turbidimetric Tetraphenylborate (TPB)

Assay Principle

At an alkaline pH Potassium ions and TPB form a turbid emulsion, the increase of which can be measured quantitatively in a photometer at 578 nm. The increase of the absorbance (A) is directly proportional to the concentration of Potassium in the sample.

Reagent

Reagent R	NaOH TPB-Na	0.50 mol/L 240 mmol/L
Standard	Potassium	5.00 mmol/L

Precautions and Warnings

Do not ingest or inhalate. In case of contact with eyes or skin; rinse immediately with plenty of soap and water. In case of severe injuries; seek medical advice immediately.

Irritant (Xi): R36/38: Irritating to eyes and skin. S26: In case of contact with eyes, rinse immediately with plenty of water and seek medical advice. S37/39: Wear suitable gloves and eye/face protection.

Reagent Storage and Stability

Reagent and standard are ready-to-use and stable till the expiration date stated on the vial label at 2-8 $^{\rm O}$ C. Once opened the reagent and the standard are stable for 3 months at the specified temperature.

Caution: Reagent is a microemulsion. Therefore, a slight apparent precipitation could occur, showing a light white deposit on the bottom of vial. It is a normal behaviour and it is recommended to resuspend solution before analysis, with a mild shaking.

Specimen Collection and preservation

Human Serum is the preferred specimen . Do not use lipemic or turbid samples.

SYMBOLS IN PRODUCT LABELLING

ECREP Authorised Representative

Use by/Expiration Date IVD LOT Batch Code/Lot number REF Catalogue Number Consult instructions for use X (Xi) - Irritant Temperature Limitation

for use

Manufactured by

System Parameters

Wavelength 578 nm Optical path 1 cm

Assay type Colorimetric end-point Direction Increase Sample: Reagent Ratio 1:50 25-37 °C Temperature

Equilibration Time 30 seconds Zero adjustment Against reagent blank

Reagent blank Low 0.0 AU High 1.5 AU Sensitivity 1.5 mmol/L Linearity 10 mmol/l

Procedure

	Reagent Blank	Standard	Sample
Reagent R Standard	1mL	1 mL	1 mL
		20 μL	
Sample			20 μL

Mix, incubate for 3 minutes at 37 °C or 5 minutes at 25 °C, Mix again thoroughly and read absorbance of sample (A_{sample}) and standard (A_{standard}) against blank.

Calculation

Serum Potassium Conc.(mmol/L) = x 5 A Standard **Quality Control**

Normal & abnormal commercial control serum of known concentrations should be analyzed with each run.

Performance Characteristics

Precision

Within run (Repeatability)

	Level 1	Level 2
n	20	20
Mean (mmol/L	4.1	7.4
SD	0.21	0.3
CV%	5	4

Run to run (Reproducibility)

	Level 1	Level 2
n	20	20
Mean (mmol/L)	4.1	7.4
SD	0.4	0.5
CV%	10	6

Sensitivity

When run as recommended, the minimum detection limit of the assay is 1.5 mmol/L.

Linearity

The assay is linear up to 10 mmol/L

Interfering substances

Haemolysis

Hemolyzed sera produce elevated results.

No significant interference up to bilirubin level of 40 mg/dL.

Lipemia

Turbid or lipemic samples produce falsely elevated results.

Urea Nitrogen above 80 mg/dL will produce elevated results. Sera containing high levels of ammonia shoud be avoided.

Expected Values

3.6 - 5.5 mmol/L 4.0 - 4.8 mmol/L Serum Plasma

Note:

It is recommended for each laboratory to establish and maintain its own reference values. The given data are only an indication.

Spectrum Diagnostics does not interpret the results of a clinical laboratory procedure; interpretation of the results is considered the responsibility of qualified medical personnel. All indications of clinical significance are supported by literature references.

Waste Disposal

This product is made to be used in professional laboratories. Please consult local regulations for a correct waste disposal. **\$56:** dispose of this material and its container at hazardous or

special waste collection point.

\$57: use appropriate container to avoid environmental contamination. **S61:** avoid release in environment, refer to special instructions/safety data sheets.

References

- 1. Hillman, G.; Beyer, G.: Z. Klin. Biochem. 5 (1967), 93 2. Hoeflmayr, J.: Praxis und Helferin 8 (1979) 3. Tietz, N.W.: Fundamentals of Clin. Chem. (1976), 876

ORDERING INFORMATION			
CATALOG NO.	QUANTITY		
298 001 298 002 298 003 298 004	2 x 25 ml 50 Test 4 x 25 ml 100 Test 2 x 100 ml 200 Test 4 x 100 ml 400 Test		

Spectrum For Diagnostic Industries - Free Zone Ismailia Free Zone Industrial Area, Block 5. Cairo- Port said Avenue.

Ismailia,Egypt
Tel: +2 064 3488 013 - +2 064 3488 014 Fax: +2 064 3488 015

www.sdi-fz.com



MDSS GmbH Schiffgraben 41 30175 Hannover, Germany



