Alkaline Phosphatase (PNPP/AMP Method)

For photometric determination of Alkaline Phosphatase (ALP) according to the recommendation of German of Clinical Chemistry .

ORDER INFORMATION

Kit Information Cat no. LG121-100 Reagent R1 - 2 x 40mL Reagent R2 - 2 x 10mL Reagent R1 - 2 x 400ml LG121-1000 Reagent R2 - 2 x 100mL

REAGENT

Reagent R1: Buffer Reagent Reagent R2: Enzyme Reagent

SUMMARY

Alkaline phosphatase (ALP), a hydrolytic enzyme acting optimally at alkaline pH, exists in blood in numerous distinct forms which originate mainly from bone and liver, but also from other tissues as kidney, placenta, testes, thymus, lung and $tumors. \ Physiological \ increases \ are found \ during \ bone \ growth \ in$ childhood and in pregnancy, while pathological increases are largely associated with hepatobiliary and bone diseases. In hepatobiliary disease they indicate obstruction of the bile ducts as in cholestasis caused by gall stones, tumors or inflammation. Elevated activities are also observed in infectious hepatitis. In bone diseases elevated AP activities originate from increased osteoblastic activity as in Paget's disease, osteomalacia (rickets), bone metastases and hyperparathyroidism.

PRINCIPLE

The increase in absorbance due to formation of4nitrophenolate is measured photometrically and is directly proportional to ALP activity in sample.

p-Nirophenylphosphate + H₂O Phosphate

+ p-nitrophenol

STORAGE INSTRUCTION AND REAGENT STABILITY

The reagent is stable up to the end of the indicated monthof expiry, if stored at 2°C- 8°C, protected from direct light and contamination is avoided. Do not freeze the reagent.

COMPONENTS AND CONCENTRATIONS

Reagent: 2-Amino methyl propanol-36.5ml/L, Zinc sulphate-0.5gm/L, Magnesium acetae - 0.5 gm/L, p-Nitrophenylphoshate -6gm/L

WASTE MANAGEMENT

Please refer to local, national / internationalregulatory requirements.

REAGENT PREPARATION

Mix, 4 parts of reagent 1 and 1 part of reagent 2 = working reagent.

The stability of the working reagent is

5 days at 15°-25°C.

4 weeks at 2°-8°C.

Reagent 2 Protect the reaction solution from light.

MATERIALS REQUIRED BUT NOT PROVIDED

NaCl solution 9 g/L. General laboratory equipments.

SPECIMEN

Serum, Heparin plasma / EDTA Plasma Stability: Serum @ 2°-8°C: 1 month @ -20°C: 3 months

Only freeze once!

Discard contaminated specimens.

ASSAY PROCEDURE

Wavelength: 405nm Temperature: 37°C

	Sample
Working Reagent	1000 μL
Sample	20 μL

Mix, incubate for 1 min. and read absorbance after every 60sec. for 120 sec. at 37°C.

CALCULATION

Note: $\Delta A/\min$ and multiply by the corresponding factor from table below:

ALP activity $U/L = \Delta A/min \times factor.(2764)$

QUALITY CONTROL

For internal quality, normal and abnormal controls of Human Matrix should be assayed with each batch of samples Each laboratory should establish corrective action in case of deviations in control recovery.

WARNINGS AND PRECAUTIONS

- The standard contains animal materials. Handle the products as potentially infections according to universal precautions and good clinical laboratory practices.
- For diagnostic purposes, the results should always be assessed with the patient's medical history, clinical & other findings.
- Avoid direct contact with skin and do not swallow.
- In very rare cases, samples of patients with gammopathy might give falsified results.
- For Professional use only!

PERFORMANCE CHARACTERISTICS

MEASURING RANGE

This test has been developed to determine Alkaline phosphatase concentrations within a measuring range from 3–1200U/L. When values exceed this range, samples should be diluted 1+1 with Na Cl solution (9 g/L) and the obtained result to

LINEARITY / LIMIT OF MAX DETECTION

The higher limit of detection is 1200 U/L

SENSITIVITY/LIMIT OF DETECTION

The lower limit of detection of the assay is 3 U/L.

SPECIFICITY/INTERFERENCES

No interference was observed by Ascorbic acid up to 30mg/dL, Bilirubin up to 40 mg/dL and Triglycerides up to 2000 mg/dL.

PRECISION

Intra assay n=20	Mean (mg/dL)	SD (mg/dL)	CV (%)
Sample 1	55.98	0.68	1.21
Sample 2	136.13	0.96	0.71
Sample 3	257.83	1.53	0.59

Intra assay n=25	Mean (mg/dL)	SD (mg/dL)	CV (%)
Sample 1	76.61	0.74	0.97
Sample 2	155.94	1.36	0.87
Sample 3	225.69	1.15	0.51

METHOD COMPARISON

A comparison of Precision Biomed Alkaline Phosphatase with commercially available assay (x) using 15 samples gave following

results: y = y = 0.997x - 0.740; r2 = 0.997.

ASSAY PARAMETERS

Mode	Kinetic	
Wavelength	405 nm	
Reaction slope	Increasing	
Path length	10 mm	
Temperature	37°C	
Reagent	1000 μL	
Sample	20 μL	
Delay Time	60 seconds	
Read Time	60 seconds	
No .of Readings	2	
Factor	2764	
Linearity	1200 U/L	



REFERENCE RANGE

Adults	30°C	37°C
Women 20-25 years (U/L)	28 - 78	42 - 98
Men 20-50 years (U/L)	38 - 94	53 - 128
Women > 60 years (U/L)	40 - 111	50 - 141
Men > 60 years (U/L)	43 - 88	56 - 119
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Children			
	Male	Female	
	(37°C) U/L	(37°C) U/L	
1-30 Days	75 - 319	48 - 406	
1 Months -1 Year	82 - 383	124 - 341	
1 Year - 3 Year	104 - 345	108 - 317	
4 Year - 6 Year	093 - 309	96 - 297	
7 Year - 9 Year	86 - 315	69 - 325	
10 Year - 12 Year	42 - 362	51 - 162	
13 Year - 15 Year	74 - 390	50 - 162	
16 Year - 18 Year	52 - 171	47 - 119	

Note: It is recommended that each laboratory should establish its own reference range based on the patient population.

LITERATURE

- Bakker AJ, Mücke M. Gammopathy interference in clinical chemistry assays: mechanisms, detection and prevention. ClinChemLabMed 2007:45(9):1240-1243
- Johnson AM Rohlfs FM Silverman LM Proteins InBurtis CA, Ashwood ER. Tietz textbook of clinical chemistry. 3rd ed. Philadelphia: W. B. Saunders Company; 1999. p.477-540
- Thomas L. Clinical Laboratory Diagnostics. 1st ed.Frankfurt: TH-Books Verlagsgesellschaft; 1998. p. 652-6.
- Guder WG, Zawta B et al. The Quality of DiagnosticSamples. 1st ed. Darmstadt: GIT Verlag; 2001; p. 14-5.
- Dati F, Schumann G, Thomas L, Aguzzi F, BaudnerS,Bienvenu J et al. Consensus of a group of professional societies and diagnostic companies on guidelines for Interim reference ranges for 14 proteins in serum based on the standardization against the IFCC/BCR/CAP reference material (CRM 470). Eur J Clin Chem Clin Biochem1996;34:517-20.
- Young DS. Effects of Drugs on Clinical LaboratoryTests.5th ed. Volume 1 and 2. Washington, DC: The American Association for Clinical Chemistry Press 2000.

INDEX OF SYMBOLS

ISO ISO 13485	International Organization or Standardization	*	Keep out of Sunlight	
m	Manufacturer	IVD	For invitro diagnostic use only	
	Expiry date	Ωį	Read product insert before use.	
LOT	Lot (batch) number	®	Do not use if package is damaged	
2°C 8°C	Store between 2-8°c	*	Keep Away From Moisture	
	ART/IFU/PRC-121-02			

Manufactured by:

LABGENE BIO-TECH PVT. LTD. GF, Plot no 13, 14, Kamla Amrut Inditech Park, Chhatral- Kadi Road, Indrad, Kadi, Mahesana, Gujarat 382715

Mobile: +91 97 27 37 9000 Email: info@labgene.in Web: www.labgene.in

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