

Catalog

Dear Valued Customers & Partners,

The past year, 2020, will remain in our memories as a very particular one and beyond the negative health impacts, the Covid-19 pandemic represents the largest economic shock the world has experienced in decades.

This crisis highlights the need for all of us to join our efforts to counter the downturn of our common business. In this context, HORIBA Medical is more than ever fully committed to bringing the best support to our partners and the best solutions for our routine customers.

In order to address these new challenges, even during this turbulent period, HORIBA Medical is doing its utmost to cushion the gloomy outlooks by always proposing new and innovative products in its portfolio: tailor-made HELO* solution, expanding of the hemostasis line, new Cellavision® products, new parameters and flags on our mid-range line Yumizen H500... We also continue to enhance our support using new tools such as Webinar presentations plus new materials and documents on our HORIBA MEDigital platform.

Firmly focused on the future, HORIBA Medical is particularly proud of its cutting-edge technology dedicated to diagnosis.

HORIBA Medical has worked to improve the quality of our products and services, enabling us to build together the best solutions to overcome this difficult period and the years ahead.

We are pleased to present this new catalog with all our available products, especially and carefully prepared for you, to be the main reference of the best IVD solutions available on our field today.

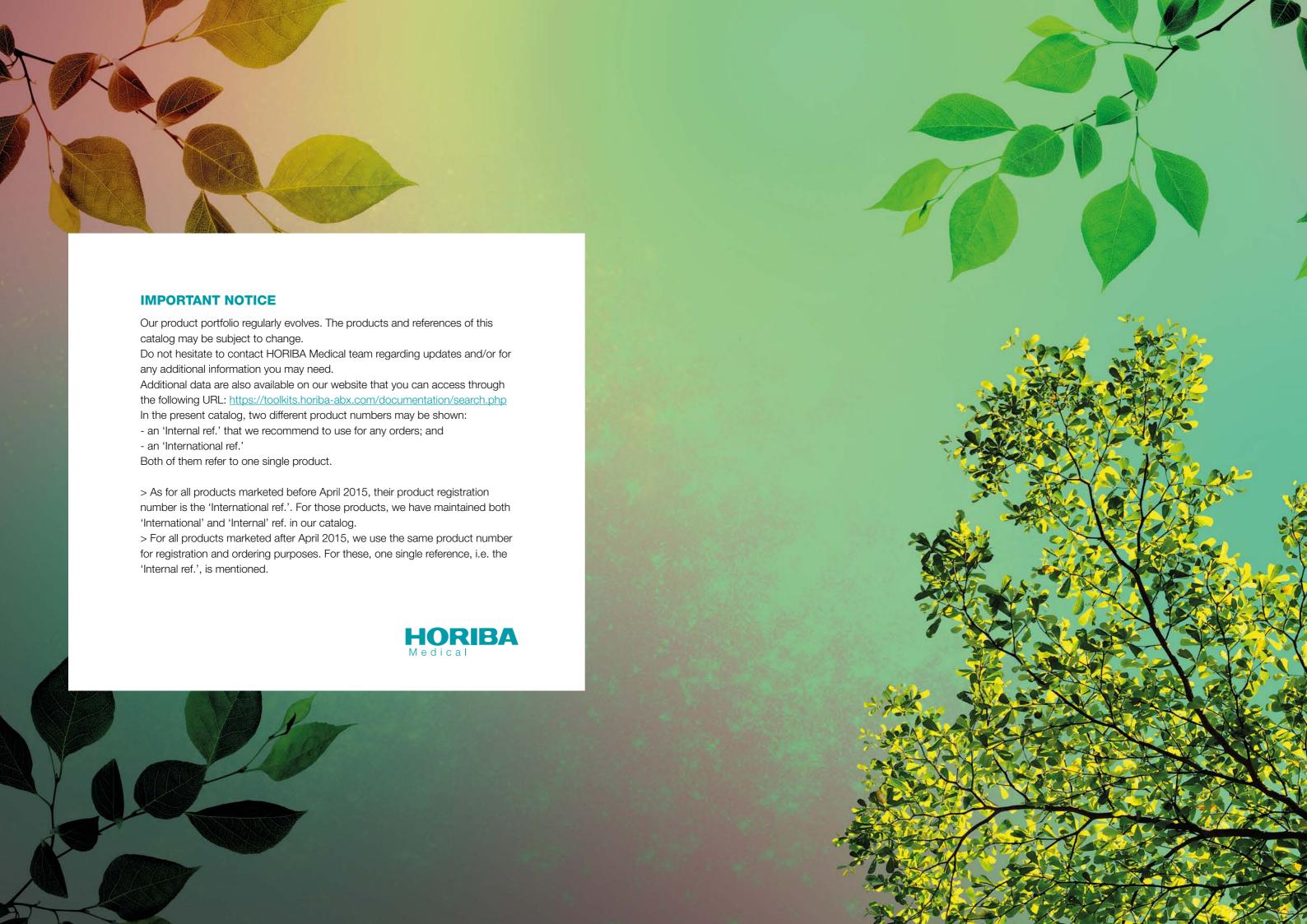
Over the longer horizon, we take pride in our continuous involvement to preserve the environment and all the people we are working with. We take this opportunity to thank you again for your trust and confidence

We have to be optimistic and stand together so that we can foresee brighter outlooks.

Stay safe & healthy!





















Pentra DX Nexus SPS Evolution Pentra XLR

Pentra ES 60

ABX Micros ES 60

Microsemi CRP





Giving dimension... ...to your projects!

Flexible, scalable and bespoke solutions for each laboratory.

Now there is no more compromise, just one solution... yours.





56 parameters with CBC/DIFF/NRBC, PLT Ox*,

Retics*, Body Fluids parameters

4 sided mixing autoloader (360°)

Throughput of 120 tests/hour

One sampling needle

Low sampling volume of 110µL

4 tracking configurations (Yumizen T6000)

User friendly software

Integrated Expert validation station with middleware capabilities (Yumizen P8000)

Optional Slide Preparation System . (Yumizen SPS) for both models

*Characteristics of Yumizen H2500 model



New hematology analyser with validation station for medium and large size laboratories



* HELO: HORIBA Evolutive Laboratory Organisation





Refer	rence	Designation	System
Internal	International		
			Yumizen H2500 / Yumizen H1500

Reagents

	4040004000 0004000		ARV RT LOOL	V : 110500 /V : 114500
_	1210901020 0901020		ABX Diluent 20L	Yumizen H2500 / Yumizen H1500
	1210901010 0901010		ABX Diluent 10L	Yumizen H2500 / Yumizen H1500
	1210906012 0906012		ABX Lysebio 1L	Yumizen H2500 / Yumizen H1500
	1300027030		Nucediff 1L	Yumizen H2500 / Yumizen H1500
	1210204050 0204050		ABX Basolyse 5L	Yumizen H2500 / Yumizen H1500
	1210904011 0904011		ABX Fluocyte 0.5L	Yumizen H2500
	1210903010 0903010		ABX Cleaner 1L	Yumizen H2500 / Yumizen H1500
	1210401005 0401005		ABX Minoclair 0.5L	For all HORIBA Medical Systems

Reagents for SPS

	1210000008 A01A00008		May-Grünwald (6 x 0.5L)	Yumizen SPS
	1210000007 A01A00007		Giemsa (6 x 0.5L)	Yumizen SPS
	1210000005 A01A00005		Buffer 7.2 (1 x 100 tablets)	Yumizen SPS
_	1210000004 A01A00004		Buffer 6.8 (1 x 100 tablets)	Yumizen SPS
	1300052022		Denatured Ethanol 70% (5L)	Yumizen SPS
	1210000006 A01A00006		Methanol (4 x 2.5L)	Yumizen SPS

Blood controls & Calibrator

ABX Difftrol Twin Packs (2 x 3 mL vial)

	1212062203	2062203		ABX Difftrol	(2N)	Yumizen H2500 / Yumizen H1500
	1212062207	2062207		ABX Difftrol	(2L)	Yumizen H2500 / Yumizen H1500
	1212062208	2062208		ABX Difftrol	(2H)	Yumizen H2500 / Yumizen H1500
AE	X Minotrol Retio	Twin Packs (2	(3 n	nL vial)		
	1212072201	2072201		ABX Minotrol Retic	(2x "2")	Yumizen H2500
	1212072202	2072202		ABX Minotrol Retic	("1" & "3")	Yumizen H2500
BF	BFTROL (3 mL vial)					
	130003	9405		BFTROL	("2" & "3")	Yumizen H2500 / Yumizen H1500
AE	X Minocal (2 ml	L vial)				
	1212032002	2032002		ABX Minocal		Calibration for all HORIBA Medical systems
	N: normal laval H:	high level 1 · low leve	al			

Consumables for SPS

1207621048	Slide - SPS (1 x 50)	Yumizen SPS
1209133945	Coloration wells (1 x 32)	Yumizen SPS
1207942009	Smearing Ribbon	Yumizen SPS
1207942008	Inking Ribbon IR-61 B CITIZEN	Yumizen SPS
1209179207	Kit of Reagent Caps	Yumizen SPS
1209179208	Filters (x3) of reagent cap	Yumizen SPS
1209179211	Filters (x4) of waste cap	Yumizen SPS
1300028757	Inking Ribbon RC200B- STAR printer	Yumizen SPS





Cost Effective Solution for Small to Mid-Size Laboratories



Compact System, Easy Handling Open Tubes & Closed Tube versions Only 2 Reagents for 5 Diff Analysis 27 Parameters, 50 tests/hour Whole Blood Micro sampling





Reference		Designation	System
Internal	International		
			Yumizen H500 / Yumizen H550

Reagents

	1210901020 0901020	ABX Diluent 20L	Yumizen H500 / Yumizen H550
	1210901010 0901010	ABX Diluent 10L	Yumizen H500 / Yumizen H550
_	1210903010 0903010	ABX Cleaner 1L	Yumizen H500 / Yumizen H550
	1210906022	Whitediff 1L	Yumizen H500 / Yumizen H550
	1210401005 0401005	ABX Minoclair 0.5L	For all HORIBA Medical Systems

Blood controls & Calibrator

ABX Difftrol Twin Packs (2 x 3 mL vial)

	1212062203	2062203	ABX Difftrol	(2N)	Yumizen H500 / Yumizen H550
Ī	1212062207	2062207	ABX Difftrol	(2L)	Yumizen H500 / Yumizen H550
Ī	1212062208	2062208	ABX Difftrol	(2H)	Yumizen H500 / Yumizen H550
Al	BX Minocal (2 ml	L vial)			
	1212032002	2032002	ABX Minocal		Calibration

N: normal level, H: high level, L: low level

Consumables

1300066018	Standard Rack Kit (5 racks)	Yumizen H550
1300066019	Sarstedt Rack Kit (5 racks)	Yumizen H550

HEMATOLOGY

YUMIZEN H500 / H550 13



Pentra DX/DF Nexus

Hematology analyser



120 tests/hour

32 parameters

Expert validation system (ABX Pentra ML)

Integrated slide-maker* (ABX SPS Evolution)

Pentra DX Nexus / Pentra DX Nexus SPS Evolution
Pentra DF Nexus / Pentra DF Nexus SPS Evolution
ABX Pentra DX 120 / ABX Pentra DX 120 SPS Evolution
ABX Pentra DF 120 / ABX Pentra DF 120 SPS Evolution
ABX Pentra 120 / ABX Pentra 120 SPS Evolution

Refere	ence	Designation	System
Internal	International	-	
			Pentra DX / DF Nexus / 120

Reagents

1210901020	0901020	ABX Diluent 20L	Pentra DX / DF Nexus / 120
1210901010	0901010	ABX Diluent 10L	Pentra DX / DF Nexus / 120
1210906012	0906012	ABX Lysebio 1L	Pentra DX / DF Nexus / 120
1210206013	0206013	ABX Leucodiff 1L	Pentra DX / DF Nexus / 120
1210204050	0204050	ABX Basolyse 5L	Pentra DX / DF Nexus / 120
1210904011	0904011	ABX Fluocyte 0.5L	Pentra DX / DF Nexus / 120
1210903010	0903010	ABX Cleaner 1L	Pentra DX / DF Nexus / 120
1210401005	0401005	ABX Minoclair 0.5L	For all HORIBA Medical Systems

Reagents for ABX SPS Evolution

1210000008 A01A00008		May-Grünwald (6 x 0.5L)	SPS Evolution
1210000007 A01A00007		Giemsa (6 x 0.5L)	SPS Evolution
1210000004 A01A00004		Buffer 6.8 (1 x 100 tablets)	SPS Evolution
1210000005 A01A00005		Buffer 7.2 (1 x 100 tablets)	SPS Evolution
1300052022		Denatured Ethanol 70% (5L)	SPS Evolution
1210000006 A01A00006		Methanol (4 x 2.5L)	SPS Evolution

Blood controls & Calibrator

ABX Difftrol Twin Packs (2 x 3 mL vial)

	1212062203	2062203		ABX Difftrol	(2N)	Pentra DX / DF Nexus / 120		
	1212062207	2062207		ABX Difftrol	(2L)	Pentra DX / DF Nexus / 120		
	1212062208	2062208		ABX Difftrol	(2H)	Pentra DX / DF Nexus / 120		
Α	ABX Minotrol Retic Twin Packs (2 x 3 mL vial)							
	1212072201	2072201		ABX Minotrol Retic	(2x "2")	Pentra DX / DF Nexus / 120		
	1212072202	2072202		ABX Minotrol Retic	("1"&"3")	Pentra DX / DF Nexus / 120		
Α	BX Erytrol Twin P	acks (2 x 3 mL v	/ial)					
A	BX Erytrol Twin P 1212072203	acks (2 x 3 mL v 2072203	rial)	ABX Erytrol	(2 x "3")	Pentra DX / DF Nexus / 120		
A -	-	•	rial)		(2 x "3") ("1"&"2")	Pentra DX / DF Nexus / 120 Pentra DX / DF Nexus / 120		
-	1212072203	2072203 2072204	rial)	ABX Erytrol	,	· · · · · · · · · · · · · · · · · · ·		

N: normal level, H: high level, L: low level

Consumables for ABX SPS Evolution

1207621048	Slide for SPS (1 x 50)	SPS Evolution
1209133945	Coloration wells (1 x 32)	SPS Evolution
1207942009	Smearing Ribbon	SPS Evolution
1207942008	Inking Ribbon IR-61 B CITIZEN	SPS Evolution
1209179207	Kit of Reagent Caps	SPS Evolution
1209179208	Filters (x3) of reagent cap	SPS Evolution
1209179211	Filters (x4) of waste cap	SPS Evolution
1300028757	Inking Ribbon RC200B- STAR printer	SPS Evolution





Blood Smearing System for Hematology

Standardization of blood films

2 slides at once

Very compact system For stationary or portable use

Peri-analytical Range







CellaVision® DM9600







- Digital Cell Morphology analysers for the laboratories
- Automatic pre-classification of the leukocyte differential count
- Characterization of erythrocyte morphology
- High precision technology
- Integration with the HELO solution (reception and transmission of results and comments)





Référence	Désignation	Systèmes
		Hemaprep DM9600/DM1200

Consumables Hemaprep

1300029910	Spreader blades	Hemaprep
1300029912	Spreader holder repair kit	Нетаргер
1300029913	Slide trays US	Нетаргер
1300029914	Slide trays international	Нетаргер
1207621048	Slide (1x 50)	Нетаргер

Consumables CellaVision®

1300033659	CellaVision Oil Pack 2x150 mL	DM9600/DM1200
1300073921	Cargille Immersion Oil Type300 (50 mL)	DC-1
1300033652	Magazine Pack Perip. Blood Orange 10 pcs	DM9600/DM1200
1300033661	Pre-printed QC Labels 1000/roll	DM9600/DM1200
1300033662	Pre-printed ER Labels 1000/roll	DM9600/DM1200

Options CellaVision®

	1300041163	CellaVision Advanced RBC Appli. DM9600	DM9600
	1300041164	CellaVision Body Fluid Appli. for DM9600	DM9600
	1300041165	CellaVision Advanced RBC Appli. DM1200	DM1200
	1300041166	CellaVision Body Fluid Appli. for DM1200	DM1200
	13000411xx	Renewable or permanent remote access licences	DM9 600/DM1200/DC-1

ABX Pentra XL 80

80 tests/ hour Auto rerun and reflex 26 parameters Large walk-away capacity Customized Dilution Ratio (CDR) Integrated workstation and validation station

Pentra XL Range Hematology analyser

Pentra XLR 77///// ************ Compact and reliable hematology platform including reticulocytes by fluorescence

36 parameters

Auto Rerun and reflex tests

Large walk-away capacity

Approximatively 80 tests/ hour

Customized Dilution Ratio (CDR)

Integrated workstation and validation station

HEMATOLOGY

Pentra XLR

ABX Pentra XL 80 / ABX Pentra 80

Refere	ence	Designation	System
Internal	International		
			Pentra XLR ABX Pentra XL80 / ABX Pentra 80

Reagents

1210901020	0901020	ABX Diluent 20L	Pentra XL 80 / Pentra 80 / Pentra XLR
1210901010	0901010	ABX Diluent 10L	Pentra XL 80 / Pentra 80 / Pentra XLR
1210906013	0906013	ABX Lysebio 0.4L	Pentra XL 80 / Pentra 80 / Pentra XLR
1210906012	0906012	ABX Lysebio 1L	Pentra XL 80 / Pentra 80 / Pentra XLR
1210206010	0206010	ABX Eosinofix 1L	Pentra XL 80 / Pentra 80 / Pentra XLR
1210906003	0906003	ABX Basolyse II 1L	Pentra XL 80 / Pentra 80 / Pentra XLR
1210903010	0903010	ABX Cleaner 1L	Pentra XL 80 / Pentra 80 / Pentra XLR
1210904011	0904011	ABX Fluocyte 0.5L	Pentra XLR
1210401005	0401005	ABX Minoclair 0.5L	For all HORIBA Medical Systems

Blood controls & Calibrator

AE	ABX Difftrol Twin Packs (2 x 3 mL vial) - Recommended by HORIBA Medical						
	1212062207	2062207		ABX Difftrol	(2L)	Pentra XL 80 / Pentra 80 / Pentra XLR	
	1212062203	2062203		ABX Difftrol	(2N)	Pentra XL 80 / Pentra 80 / Pentra XLR	
	1212062208	2062208		ABX Difftrol	(2H)	Pentra XL 80 / Pentra 80 / Pentra XLR	
AE	ABX Minotrol 16 Twin Packs (2 x 2.5 mL vial)						
	1212042208	2042208		ABX Minotrol 16	(2L)	Pentra XL 80 / Pentra 80 / Pentra XLR	
	1212042202	2042202		ABX Minotrol 16	(2N)	Pentra XL 80 / Pentra 80 / Pentra XLR	
	1212042209	2042209		ABX Minotrol 16	(2H)	Pentra XL 80 / Pentra 80 / Pentra XLR	
ΑE	X Minotrol Retio	Twin Packs (2 >	3 m	L vial)			
	1212072201	2072201		ABX Minotrol Retic	(2x "2")	Pentra XLR	
	1212072202	2072202		ABX Minotrol Retic	("1"&"3")	Pentra XLR	
AE	ABX Minocal (2 mL vial)						
	1212032002	2032002		ABX Minocal		Calibration for all HORIBA Medical systems	

N: normal level, H: high level, L: low level

PENTRA XL RANGE 19



ABX Pentra 60 Range Hematology analyser



60 tests/hour 26 parameters Workstation capability Open tube sampling

ABX Pentra 60 C+ / Pentra ES 60 ABX Pentra 60 / Pentra MS 60

Refere	ence	Designation	System
Internal	International		
			ABX Pentra 60 C+ / Pentra ES 60 ABX Pentra 60 / Pentra MS 60

Reagents

1210901020	0901020	ABX Diluent 20L	Pentra 60 C+ / Pentra 60 / Pentra ES 60
			Pentra MS 60
1210901010	0901010	ABX Diluent 10L	Pentra 60 C+ / Pentra 60 / Pentra ES 60
1210906013	0906013	ABX Lysebio 0.4L	Pentra 60 C+ / Pentra 60 / Pentra ES 60
1210206010	0206010	ABX Eosinofix 1L	Pentra 60 C+ / Pentra 60 / Pentra ES 60
1210906003	0906003	ABX Basolyse II 1L	Pentra 60 C+ / Pentra 60 / Pentra ES 60
1210903010	0903010	ABX Cleaner 1L	Pentra 60 C+ / Pentra 60 / Pentra ES 60
1210401005	0401005	ABX Minoclair 0.5L	For all HORIBA Medical Systems

Blood controls & Calibrator

ΑI	ABX Difftrol Twin Packs (2 x 3 mL vial) - Recommended by HORIBA Medical							
	1212062207	2062207	ABX Difftrol	(2L)	Pentra 60 C+ / Pentra 60 / Pentra ES 60			
	1212062203	2062203	ABX Difftrol	(2N)	Pentra 60 C+ / Pentra 60 / Pentra ES 60			
	1212062208	2062208	ABX Difftrol	(2H)	Pentra 60 C+ / Pentra 60 / Pentra ES 60			
ΑI	ABX Minotrol 16 Twin Packs (2 x 2.5 mL vial)							
	1212042208	2042208	ABX Minotrol 16	(2L)	Pentra 60 C+ / Pentra 60 / Pentra ES 60			
	1212042202	2042202	ABX Minotrol 16	(2N)	Pentra 60 C+ / Pentra 60 / Pentra ES 60			
	1212042209	2042209	ABX Minotrol 16	(2H)	Pentra 60 C+ / Pentra 60 / Pentra ES 60			
Al	ABX Minocal (2 mL vial)							
	1212032002	2032002	ABX Minocal		Calibration for all HORIBA Medical systems			

N: normal level, H: high level, L: low level

ABX Micros 60



60 tests/hour Open or closed tube sampling 18 parameters

ABX Micros Range Hematology analyser

ABX Micros ES 60

- CBC + 3 DIFF
- Comprehensive Data Management
- Integrated Color Touch Screen
- 19 parameters

ABX Micros ES 60 / ABX Micros 60

ABX Micros

ABX Micros ESV 60 / ABC Vet / Advia 60

Internal International

Designation

System

ABX Micros ES 60 / ABX Micros 60 ABX Micros ESV 60 / ABC Vet / Advia 60

Reagents

1210802020	0802020	ABX Minidil LMG 20L	Micros 60 / Micros ES60	
1210802010	0802010	ABX Minidil LMG 10L	Micros 60 / Micros ES60	
1210702010	0702010	ABX Minilyse LMG 1L	Micros 60 / Micros ES60	
1210403010	0403010	ABX Miniclean 1L	Micros 60 / Micros ES60	
1210602050	0602050	ABX Minipack LMG	Micros 60 / Micros ES60 / Micros Care ST	
1210606051	0606051	Minipack AD 60 (x4)	Advia 60	
1210604052	0604052	ABX Vetpack	Micros ESV 60 / ABC Vet	
1210401005	0401005	ABX Minoclair 0.5L	For all HORIBA Medical Systems	
1210906020	0906020	Minilysebio 0.4L	Micros 60 / Micros ES60	

Blood controls & Calibrator

ABX Minotrol 16 Twin Packs (2 x 2.5 mL vial)

727 Time and 10 Time and (2 × 210 m2 Time)								
1212042208	2042208	ABX Minotrol 16 (2L)	Micros 60 / Micros ES60 / Advia 60 Micros Care ST / ABC Vet / Micros ESV60					
1212042202	2042202	ABX Minotrol 16 (2N)	Micros 60 / Micros ES60 / Advia 60 Micros Care ST / ABC Vet / Micros ESV60					
1212042209	2042209	ABX Minotrol 16 (2H)	Micros 60 / Micros ES60 / Advia 60 Micros Care ST / ABC Vet / Micros ESV60					
1212042024	2042024	Minotrol Smartcard	Micros 60 / Advia 60					
ABX Minocal (2 mL vial)								

1212032002 2032002 N: normal level, H: high level, L: low level

ABX Minocal

Calibration for all HORIBA Medical systems

Thermal Paper roll Micros ES60

Micros ES60 / Micros Care ST



Microsemi CRP

Emergencies, Physician Offices, Near Patient Testing Whole Blood Micro Sampling CBC + CRP in 4 minutes 19 parameters

Easy to use compact system

CRP Range Infectious Care Screening

DIFF + CRP in 3 minutes

27 parameters



Microsemi CRP ABX Micros CRP 200 / ABX Micros CRP / Pentra MS CRP

Reference Designation System Internal International

ABX Micros ES 60 / ABX Micros 60 Microsemi CRP / ABX Micros CRP 200 ABX Micros CRP / Pentra MS CRP

Reagents

1210206010	0206010	ABX Eosinofix 1L	Pentra MS CRP	
1210906003	0906003	ABX Basolyse II 1L	Pentra MS CRP	
1210901010	0901010	ABX Diluent 10L	Pentra MS CRP	
1210901020	0901020	ABX Diluent 20L	Pentra MS CRP	
1210802010	0802010	ABX Minidil LMG 10L	Micros CRP 200 / Micros CRP / Microsemi CRP	
1210802020	0802020	ABX Minidil LMG 20L	Micros CRP 200 / Micros CRP / Microsemi CRP	
1210903010	0903010	ABX Cleaner 1L	Pentra MS CRP	
1210906004	0906004	ABX Alphalyse 0.4L	Micros CRP 200 / Micros CRP	
1210906014	0906014	ABX Alphalyse 360mL	Micros CRP 200 / Micros CRP	
1210403010	0403010	ABX Miniclean 1L	Micros CRP 200 / Micros CRP / Microsemi CRP	
1210903011	0903011	ABX Cleaner 0.5L	Micros CRP 200 / Micros CRP	
1210906013	0906013	ABX Lysebio 0.4L	Microsemi CRP / Pentra MS CRP	
1210401005	0401005	ABX Minoclair 0.5L	For all HORIBA Medical Systems	
1210906020	0906020	Minilysebio 0.4L	Micros CRP 200	
3014042431	0501015	ABX CRP Rea	Micros CRP 200 / Pentra MS CRP	
3200345511		CRP Unit 50 (2 kits of 50 tests)	Microsemi CRP	

Blood controls & Calibrator

ABX Difftrol Twin Pack (2 x 3 mL vial) 1212062203 2062203

1212062203	2062203		ABX Difftrol	(2N)	Pentra MS CRP		
1212062207	2062207		ABX Difftrol	(2L)	Pentra MS CRP		
1212062208	2062208		ABX Difftrol	(2H)	Pentra MS CRP		
ABX Minotrol CRP Twin Packs (2 x 2.5 mL vial)							
1212042205	2042205		ABX Minotrol CRP	(2 x "1")	Micros CRP 200 / Micros CRP / Microsemi CRP Pentra MS CRP		
1212042206	2042206		ABX Minotrol CRP	(2 x "2")	Micros CRP 200 / Micros CRP / Microsemi CRP Pentra MS CRP		
1212042207	2042207		ABX Minotrol CRP	(2 x "3")	Micros CRP 200 / Micros CRP / Microsemi CRP Pentra MS CRP		
alibrator							

3014042432	0501016	ABX CRP	Std Micros CRP / Micros CRP 200 / Microsemi CRP Pentra MS CRP
1212032002	2032002	ABX Mind	ocal Calibration for all HORIBA Medical systems

N: normal level, H: high level, L: low level

Consumables

1211103100 1103100	Thermal Paper Roll (DPU 414)	Micros CRP 200 / Micros CRP
3200044036	Thermal paper (10 rolls)	Microsemi CRP













Yumizen G400

Yumizen G200

Yumizen G100





Bench top automatic hemostasis analyser

4 independent measuring channels

3 measuring methods: clotting, turbidimetric and chromogenic 150 PT tests/hour







- 8 independent measuring channels
- 3 measuring methods: clotting, turbidimetric and chromogenic
- Up to 44 + 4 assays on board
- Optional cap piercing
- Reflex tests





Reference	Designation	Formulation		f tests G1550	Packaging	Systems
Screening						Yumizen G1550 Yumizen G1500 Yumizen G800
1300036338	Yumizen G PT 5	Lyophilized	235	215	5 x 5 mL	G800 / G1500-G1550
1300036373	Yumizen G PT Lig 4	Liquid	444	396	12 x 4 mL	G800 / G1500-G1550
1300036376	Yumizen G PT Reco 10	Lyophilized	950	910	10 x 10 mL	G800 / G1500-G1550
1300036377	Yumizen G APTT 4	Lyophilized	444	396	6 x 4 mL	G800 / G1500-G1550
1300036379	Yumizen G APTT Lig 2	Liquid	204	156	6 x 2 mL	G800 / G1500-G1550
1300036381	Yumizen G APTT Lig 4	Liquid	888	792	12 x 4 mL	G800 / G1500-G1550
1300036383	Yumizen G FIB 2	Lyophilized	408	312	12 x 2 mL	G800 / G1500-G1550
1300036384	Yumizen G FIB 5	Lyophilized	1104	1032	12 x 5 mL	G800 / G1500-G1550
1300036382	Yumizen G TT	Lyophilized	324	276	12 x 3 mL	G800 / G1500-G1550
hrombophilia						
1300081526	ACTICLOT Protein S *	Lyophilized			4 x (1 mL + 1 mL)	G800 / G1500-G1550
1300081527	ACTICLOT C *	Lyophilized			3 x (1.5 mL + 1.5 mL)	G800 / G1500-G1550
1300036390	Yumizen G AT *	Lyophilized	216	184	4 x 3 mL	G800 / G1500-G1550
1300030530	ACTICHROME ATIII *	Lyophilized			6 x (2 + 2 + 5 mL)	G800 / G1500-G1550
1300079431	DVVtest10 **	Lyophilized			10 x 2 mL	G800 / G1500-G1550
1300079433	DVVconfirm 5 **	Lyophilized			10 x 1 mL	G800 / G1500-G1550
ibrin formation	& degradation					,
1300036391	Yumizen G DDi 2	Liquid	147	120	3 x 6.5 mL	G800 / G1500-G1550
nticoagulant Tl	herapy					
300081662	ACTICHROME Heparin (Anti-FXa)	Lyophilized			4 x (5 + 5 + 5 mL)	G800 / G1500-G1550
	, , ,	Lyopintized			4 x (3 + 3 + 3 IIIL)	0000/ 01300-01330
Auxiliary Reager	NTS					
1300036386	Yumizen G CaCl2 4	Liquid	888	792	12 x 4 mL	G800 / G1500-G1550
1300036385	Yumizen G IMIDAZOL	Liquid	1900	1680	12 x 15 mL	G800 / G1500-G1550
1300036418	Yumizen G SORB	Liquid			12 x 15 mL	G800 / G1500-G1550
1300036420	Yumizen G CLEANER	Liquid			4.5 L	G800 / G1500-G1550
1300036421	Yumizen G Clean SYS	Liquid			0.1 L	G800 / G1500-G1550
Calibrators & Co	ontrols					
1300036412	Yumizen G CTRL I & II	Lyophilized			5 x 1 mL (x2)	G800 / G1550
1300036416	Yumizen G CAL	Lyophilized			12 x 1 mL	G800 / G1550
1300036414	Yumizen G CTRL DDi I & II	Lyophilized			5 x 1 mL (x2)	G800 / G1550
1300079434	LAtrol Abnormal Control Plasma **	Lyophilized			10 x 0.5 mL	G800 / G1550
1300079435	LAtrol Normal Control Plasma **	Lyophilized			10 x 1 mL	G800 / G1550
1300081529	Special Coagulation Control Normal *	Lyophilized			10 x 1 mL	G800 / G1550
1300081560	Special Coagulation Control Abnormal *	Lyophilized			10 x 1 mL	G800 / G1550
1300081561	Special Coagulation Calibrator PC/PS/AT *	Lyophilized			6 vials	G800 / G1550
1300081563	ACTICHROME Heparin UFH Control Set *	Lyophilized			5 x (1 mL + 1 mL)	G800 / G1550
1300081564	ACTICHROME Heparin LMWH Control Set *	Lyophilized			5 x (1 mL + 1 mL)	G800 / G1550
1300081565	ACTICHROME Heparin UFH Calibrator Set *	Lyophilized			2 x (5 vials 1 mL)	G800 / G1550
1300081566	ACTICHROME Heparin LMWH Calibrator Set *	Lyophilized			2 x (5 vials 1 mL)	G800 / G1550
Consumables						
1300036425	Yumizen G Cuvettes				2 x 500 cuvettes	G800 / G1550
1300039490	Magnetic stirrers				10	G800 / G1550
accessories	External Barcode Reader				1	G800 / G1550
1300047687 1300046575	UPS				1	G800 / G1550 G800 / G1550
1300046576	Screen Arm Support				1	G800 / G1550
1300046576	Adaptor 18/24				1	G800 / G1550
1300083167	Adaptor 18/32				1	G800 / G1550
1300003100	7.auptor 10/32				1	0000 / 01330

HEMOSTASIS YUMIZEN G1550 / G1500 / G800 29

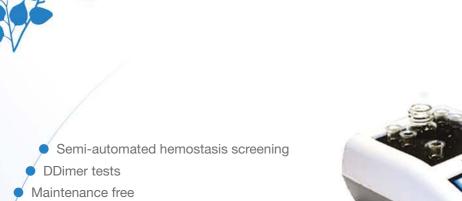
1300071527 Insert for sample rack

G800 / G1550



Whole blood point of care system INR monitoring of oral anti hemostasis Single use reaction cuvette RFID reagents identification Mobile device









Small footprint



Reference	Designation	Formulation	Number of tests	Packaging	System
					Yumizen G400 DDi

Reagents

420000	200	V : C DT 5	1 1:0: 1	050	5 5 1	V : C000 /V : C/00 DD:
13000363	38	Yumizen G PT 5	Lyophilized	250	5 x 5 mL	Yumizen G200 / Yumizen G400 DDi
13000363	373	Yumizen G PT Liq 4	Liquid	480	12 x 4 mL	Yumizen G200 / Yumizen G400 DDi
13000363	76	Yumizen G PT Reco 10	Lyophilized	1000	10 x 10 mL	Yumizen G200 / Yumizen G400 DDi
13000363	377	Yumizen G APTT 4	Lyophilized	480	6 x 4 mL	Yumizen G200 / Yumizen G400 DDi
13000363	79	Yumizen G APTT Liq 2	Liquid	240	6 x 2 mL	Yumizen G200 / Yumizen G400 DDi
13000363	881	Yumizen G APTT Liq 4	Liquid	960	12 x 4 mL	Yumizen G200 / Yumizen G400 DDi
13000363	886	Yumizen G CaCl2 4	Liquid	960	12 x 4 mL	Yumizen G200 / Yumizen G400 DDi
13000363	883	Yumizen G FIB 2	Lyophilized	960	12 x 2 mL	Yumizen G200 / Yumizen G400 DDi
13000363	884	Yumizen G FIB 5	Lyophilized	1200	12 x 5 mL	Yumizen G200 / Yumizen G400 DDi
13000363	885	Yumizen G IMIDAZOL	Liquid	960	12 x 15 mL	Yumizen G200 / Yumizen G400 DDi
13000363	82	Yumizen G TT	Lyophilized	360	12 x 3 mL	Yumizen G200 / Yumizen G400 DDi
13000363	90	Yumizen G AT	Lyophilized	240	4 x 3 mL	Yumizen G200 / Yumizen G400 DDi
13000363	91	Yumizen G DDi 2	Liquid	165	3 x 6.5 mL	Yumizen G200 / Yumizen G400 DDi
13000364	17	Yumizen G INR kit	Lyophilized	25	25 tests	Yumizen G100 INR

Calibrators & Controls

1300036412	Yumizen G CTRL I & II	Lyophilized	5 x 1 mL (x2)	Yumizen G200 / Yumizen G400 DDi
1300036416	Yumizen G CAL	Lyophilized	12 x 1 mL	Yumizen G200 / Yumizen G400 DDi
1300036414	Yumizen G CTRL DDi I & II	Lyophilized	5 x 1 mL (x2)	Yumizen G200 / Yumizen G400 DDi

Consumables

1300036425	Yumizen G Cuvettes	2 x 500 cuvettes	Yumizen G200 / Yumizen G400 DDi
1300039490	Magnetic stirrers	10	Yumizen G200 / Yumizen G400 DDi
1300039292	Yumizen G100 plunger pipette 20 μl	1	Yumizen G100 INR
1300039293	Yumizen G100 plugged pipette 20 μl	1	Yumizen G100 INR
1300039294	Yumizen G400 printer paper (1 roll)	1	Yumizen G400 DDi

Accessories

1300047687	External Barcode Reader	1	Yumizen G200 / Yumizen G400 DDi
1300062211	Printer for Yumizen G200	1	Yumizen G200









Pentra C400

Clinical chemistry analyser











300 tests/hour in colorimetric

Up to 420 tests per hour with the ISE module 55 on-board parameters with back-up possibility Integrated workstation and validation station Continuous loading







90 tests/hour in colorimetric

- Up to 360 tests/hour with ISE (120-150 tests/hour in standard configuration)
 - Fully automatic and ergonomic

ENZYMES & SUBSTRATES



Referer Internal	Reference ABX Pentra Internal International Designation			Container Format	of tests PC200*	Calibrators	Controls	
nzymes •								
1620001626	A11A01626		ALP CP	Cassette	125	120	1	18, 19
1220001627	A11A01627		ALT CP	Cassette	250	325	1	18, 19
1220001629	A11A01629		AST CP	Cassette	250	325	1	18, 19
1220001628	A11A01628		Amylase CP	Cassette	125	120	1	18, 19, 31
1220001643	A11A01643		CK-MB RTU	Vial	125	90	N/A	34
1220001632	A11A01632		CK NAC CP	Cassette	125	120	1	18, 19, 34
1220001630	A11A01630		GGT CP	Cassette	250	275	1	18, 19
1220001631	A11A01631		Lipase CP	Cassette	100	N/A	1	18, 19
1220001824	A11A01824		LDH CP	Cassette	125	120	1	18, 19
1220001871	A11A01871		LDH IFCC CP	Cassette	125	120	1	18, 19
ubstrates •			Albumin CP	Cassette	327	295	1	18 19
1220001664	A11A01664							18, 19
1220001639	A11A01639		Bilirubin, Total CP	Cassette	130	135	1	18, 19
1220001635	A11A01635		Bilirubin, Direct CP	Cassette	100	115	1	18, 19
1220001954	A11A01954		Calcium AS CP	Cassette	285	265	1	18, 19, 31
1220001634	A11A01634		Cholesterol CP	Cassette	344	305	1	18, 19
1220001636	A11A01636		HDL Direct CP	Cassette	240	235	2	18, 19
1220001934	A11A01934		HDL Direct 100 CP	Cassette	100	100	2	18, 19
1220001638	A11A01638		LDL Direct CP	Cassette	100	100	3	18, 19
1220001645	A11A01645		CO2 RTU	Vial	200 (2 x 100)	170 (2 x 85)	4	21
1220001933	A11A01933		Creatinine 120 CP	Cassette	120	130	1	18, 19, 31
1220001907	A11A01907		Enzymatic Creatinine CP Fructosamine CP	Cassette	120 200	120 N/A	1 14	18, 19, 31 29, 30
1220001668	A11A01668		Glucose PAP CP	Cassette	295	265	1	18, 19, 31
1220001667	A11A01667		Glucose HK CP	Cassette	295	190	1	18, 19, 31
1220001637	A11A01637		Iron CP	Cassette	282	350	1	18, 19
1220001037	A11A01037 A11A01721		Lactic Acid	Vial	260 (10 x 26)	240 (10 x 24)	1	18, 19
1220001721	A11A01721 A11A01646		Magnesium RTU	Vial	200 (10 x 20) 200 (2 x 100)	170 (2 x 85)	1	18, 19
1220001646	A11A01646 A11A01665		Phosphorus CP	Cassette	100	100 (2 x 85)	1	18, 19, 31
1220001669	A11A01669		Total Protein CP	Cassette	300	255	1	18, 19, 31
1220001009	A11A01009 A11A01932		Total Protein 100 CP	Cassette	100	105	1	18, 19
1220001932	A11A01932 A11A01640		Triglycerides CP	Cassette	295	265	1	18, 19
1220001640	A11A01640 A11A01670		Uric Acid CP	Cassette	220	270	1	18, 19, 31
1220001670	A11A01676 A11A01641		Urea CP	Cassette	220	270	1	18, 19, 31
1220001041	A11A01041		Grea CI	cassette	220	2/0	1	10, 19, 31

Cassette

100

Urinary Proteins CP

1220001642 A11A01642

SPECIFIC PROTEINS & AUXILIARY REAGENTS

In	Reference Internal International		ABX Pentra Designation	Container Format	Number PC400/P400	of tests PC200*	Calibrators	Controls	Auxiliary reagents
	iterriai	II ILGITIALIOTIAI	— — Designation	- Offilat	1 0400/1 400				Teagerits
Spec	cific Protein	ns 🔵							
12	220001687	A11A01687	Apo A1	Vial	215	N/A	13	28	33, 35
12	220001688	A11A01688	Apo B	Vial	300	N/A	13	28	33 , 35
17	220001611	A11A01611	CRP CP	Cassette	200	175	6 Std 16 H.Sens.	22 Std 25 H.Sens.	Saline
12	220001900	A11A01900	Ferritin 2 CP	Cassette	100	63	7	23	Saline
12	220001697	A11A01697	Haptoglobin	Vial	690	N/A	12	27	33, 35
12	220001702	A11A01702	HbA1c WB	Vial	345	300	11	26	(36)
12	220001923	A11A01923	Ig A CP	Cassette	100	80	15	32, 33	
12	220001924	A11A01924	Ig G CP	Cassette	100	80	15	32, 33	
12	220001925	A11A01925	Ig M CP	Cassette	100	80	15	32, 33	
12	220001691	A11A01691	Карра	Vial	300	N/A	12	27	33, 35
12	220001692	A11A01692	Lambda	Vial	300	N/A	12	27	33, 35
	130003	2563	Micro ALBUMIN 2 CP	Cassette	150	136	10 Uri. 12 Ser.	24 Uri. 27 Ser.	35 Ser.
12	220001904	A11A01904	Myoglobin 2 CP	Cassette	100	N/A	9	23	
12	220001696	A11A01696	Orosomucoid	Vial	438	N/A	12	27	34, 35
12	220001695	A11A01695	Prealbumin	Vial	200	N/A	12	27	34, 35
12	220001613	A11A01613	RF CP	Cassette	100	120	8	22	Saline
12	220001926	A11A01926	Transferrin CP	Cassette	100	80	15	32, 33	
	130002	2598	ASO 2 CP	Cassette	100	100	17	22	

— Аі	Referer Internal uxiliary Reage	International	ABX Pentra Designation	Container Format –	Volume	Products #
	1220001655	A11A01655	Accelerator I CP	Cassette	99 mL	33
	1220001662	A11A01662	Sample Diluent CP	Cassette	99 mL	35

^{*} For Pentra C200, depending to the real volume of reagent, the number of tests can vary slighty from the number of tests indicated.

CALIBRATORS & CONTROLS







Refere Internal	Reference ernal International		ABX Pentra Designation	Container Format	Level Description	Products #
Calibrators (
1220001652	A11A01652		MultiCal	10 x 3 mL		1
1220001647	A11A01647		HDL Cal	2 x 1 mL		2
1220001678	A11A01678		LDL Cal	2 x 1 mL		3
1220001648	A11A01648		CO2 Cal	3 x 3 mL		4
1220001898	A11A01898		TPU Cal	3 x 3 mL		5
1220001616	A11A01616		CRP Cal	5 x 1 mL	2.5, 10, 40, 80, 160 mg/L	6
1220001619	A11A01619		Ferritin Cal	4 x 1 mL	500 ng/mL	7
1220001618	A11A01618		RF Cal	5 x 1 mL	10, 20, 40, 80, 120 IU/mL	8
1220001620	A11A01620		Myoglobin Cal	5 x 1 mL	0, 62.5, 125, 250, 500 ng/mL	9
13000	32565		Micro ALB 2 Cal	5 x 1 mL		10
1220001703	A11A01703		HbA1c WB Cal	1 x 8 mL + 5 x 2 mL		11
1220001698	A11A01698		Protein Cal	4 x 1 mL		12
1220001773	A11A01773		Apo Cal	2 x 1 mL		13
1220001680	A11A01680		Fructo Cal	3 x 1 mL		14
1220001927	A11A01927		SP Cal	5 x 1 mL		15
1220001983	A11A01983		CRP HS Cal	2 x 2 mL	10 mg/l	16
13000	22600		ASO 2 Cal	5 x 1 mL		17

Controls •



1220001653	A11A01653	N Control	10 x 5 mL	18
1220001654	A11A01654	P Control	10 x 5 mL	19
1220001650	A11A01650	CO2 Control	3 x 3 mL	21
1220001621	A11A01621	Immuno I Control L/H	1 x 3 mL + 1 x 3 mL	22
1220001622	A11A01622	Immuno II Control L/H	1 x 3 mL + 1 x 3 mL	23
1220001967	A11A01967	Micro ALB Control L/H	1 x 10 mL + 1 x 10 mL	24
1220001731	A11A01731	Low CRP Control	4 x 1 mL	25
1220001704	A11A01704	HbA1c WB Control	2 x 0.25 mL + 2 x 0.25 mL	26
1220001700	A11A01700	Protein Control L/H	2 x 1 mL + 2 x 1 mL	27
1220001774	A11A01774	Apo Control L/H	1 mL + 1 mL	28
1220001681	A11A01681	Fructo Control N	3 x 1 mL	29
1220001682	A11A01682	Fructo Control P	3 x 1 mL	30
1220001674	A11A01674	Urine Control L/H	1 x 10 mL + 1 x 10 mL	31
1220001928	A11A01928	SP Control Low	3 x 1 mL	32
1220001929	A11A01929	SP Control High	3 x 1 mL	33
1300026187 CK 2 Control		4 x 5 mL	34	

ISE:

Electrodes, Solutions and Standards







Refere	ence	ABX Pentra	Container	Capacity
Internal	International	Designation	Format	

Pentra C400, ABX Pentra 400 and Pentra C200 ISE option

280 mL
1001
100 mL
100 mL
1
1
1
1
25 mL
280 mL
90 mL
1 1 2 2 2 2 2 2

CONSUMABLES

1220001789

3100145498

1220001572 A11A01572

A11A01789

A11A01851

& ACCESSORIES

Pentra C400 / ABX Pentra 400 Consumables & Accessories



Doforono		umables & Accessories	Pack Size
Referenc Internal	e International	Designation	Pack Size
IIIIGITIAI	IIILEITIALIOTIAI		
1220001891	A11A01891	Cuvette Segments (Racks)	450
1220001765	A11A01765	Sample Cup - Blue	1000
1220001766	A11A01766	Sample Cup - Green	1000
1220001767	A11A01767	Sample Cup - White	1000
1220001768	A11A01768	Sample Cup - Yellow	1000
1228086648	B8086648	100 µL Teflon Seal	10
1228086583	B8086583	1000 μL + 500 μL 0'Rings	10
1228086605	B8086605	1000 μL + 500 μE 0 Kings	10
	B1034626	10 mL Reaq Cup	
1221034626		3 1	100
1221037307	B1037307	15 mL Reag Cup	100
1221034634	B1034634	4 mL Reag cup	100
1228089078	B8089078	Liq. Elem + Gasket Ring Filter	1
1228078955	B8078955	Reagent Syringe (1000 µL)	1
1228076812	B8076812	Sample Syringe (100 μL)	1
1228088454	B8088454	Seal Replacement Tool	1
1207230166	HAX0166	Sample Rack Stickers - # 01 to 10	1
1207230167	HAX0167	Sample Rack Stickers - # 11 to 20	1
1207230168	HAX0168	Sample Rack Stickers - # 21 to 30	1
1207230169	HAX0169	Sample Rack Stickers - # 31 to 40	1
1207230170	HAX0170	Sample Cup Rack Stickers - # 41 to 50	1
1207230171	HAX0171	Sample Cup Rack Stickers - # 51 to 60	1
1207230172	HAX0172	Sample Cup Rack Stickers - # 61 to 70	1
1207230173	HAX0173	Calibrator Sample Rack Stickers - # 71 to 84	1
1207230174	HAX0174	Control Sample Rack Stickers - # 85 to 99	1
1207230175	HAX0175	Reagent Rack Stickers - # 60 to 69	1
1207230176	HAX0176	Reagent Rack Stickers - # 70 to 79	1
1207230188	HAX0188	Calibrator Reagent Rack Stickers - # 01 to15	1
1207230190	HAX0190	Control Reagent Rack Stickers - # 30 to 44	1
1207230191	HAX0191	Control Reagent Rack Stickers - # 45 to 59	1
1209159778	XEA778CS	Sample Rack + Adaptors	1
1209131968	XDA968A	Tube Adaptors	5
1209131849	XDA849A	Reagent Rack + Adaptors	1
1209159780	XEA780AS	4 mL Vial Adaptors	3
1209159781	XEA781AS	10 mL Vial Adaptors	3
1209159782	XEA782AS	Sample Cup Adaptors	3
1209159783	XEA783AS	Waste Container	1
1209159935	XEA935AS	Cleaning kit for Chloride electrode	1
1207791004	LBH004A	Water Container	1
1209132805	XDA805B	Biocup Holder	1
1209131850	XDA850A	Cal/Ctrl Reagent Rack + Adaptors	1
1207230273	HAX0273	Sample Rack Stickers - # 1 to 10 (2 of 5 Int.)	1
1207230274	HAX0274	Sample Rack Stickers - # 11 to 20 (2 of 5 Int.)	1
1207230277	HAX0277	Sample Cup Rack Stickers - # 41 to 50 (2 of 5 Int.)	1
1207230278	HAX0278	Sample Cup Rack Stickers - # 51 to 60 (2 of 5 Int.)	1
1207230279	HAX0279	Sample Cup Rack Stickers - # 61 to 70 (2 of 5 Int.)	1
1207230280	HAX0280	Calibrator Sample Rack Stickers - # 71 to 84 (2 of 5 Int.)	1
1207230281	HAX0281	Control Sample Rack Stickers - # 85 to 99 (2 of 5 Int.)	1
1300028		Lamp P400	1
1203601		Lamp PC400	1
1220001755	A11A01755	ABX Pentra Clean-Chem CP	30 mL
1220001754	A11A01754	ABX Pentra Deproteinizer CP	29 mL
	144104500	ABV B + GI GI GO GB	

ABX Pentra Clean-Chem 99 CP

ABX Pentra Dummy-E

4 mL Nalgene Vials

Pentra C400 Consumables & Accessories

Reference Designation Internal International

	-
(

Pack Size

1220001922 A11A01922	30/10 cassettes kit	6
1207230334 HAX0334	PC400 Open Cassette Sticker sheet 1	1
1207230335 HAX0335	PC400 Open Cassette Sticker sheet 2	1
1207941034 NAB034A	Black _ Cartridge for WP4015 (3400)	1
1207941035 NAB035A	Cyan _ Cartridge for WP4015 (3400)	1
1207941036 NAB036A	Magenta _ Cartridge for WP4015 (3400)	1
1207941037 NAB037A	Yellow _ Cartridge for WP4015 (3400)	1
1207941038 NAB038A	Maintenance box for WP4015	1
1300012671	Black _ Cartridge for WF5110DW (4000)	1
1300012672	Cyan _ Cartridge for WF5110DW (4000)	1
1300012673	Magenta _ Cartridge for WF5110DW (4000)	1
1300012674	Yellow _ Cartridge for WF5110DW (4000)	1
1300017438	ABX Pentra Precitest Solution	1 x 15 mL

Pentra C200 Consumables & Accessories

Reference Designation

Pack Size

Internal	International	Doughaton	
1220001914	A11A01914	Cuvette racks PC200	60 x 96
1220001915	A11A01915	Cuvette waste bags	100
1220001765	A11A01765	Sample Cup - Blue	1000
1220001766	A11A01766	Sample Cup - Green	1000
1220001755	A11A01755	ABX Pentra Clean-Chem CP	30 mL
1220001754	A11A01754	ABX Pentra Deproteinizer CP	29 mL
1220001767	A11A01767	Sample Cup - White	1000
1220001768	A11A01768	Sample Cup - Yellow	1000
1221040310	F10B40310	Halogen Lamp	1
1221026109	F10B26109	Sample syringe tips	10
1221005508	F10B05508	Reagent syringe tips	10
1221005511	F10B05511	Wash syringe tips	10
1221040253	F10B40253	Filter for water system tank	1
1209179086	XEC086AS	Silicon oil for tips	3 mL
1220001922	A11A01922	30/10 cassettes kit	6
1207230297	HAX0297	Barcode sheet	1
130001	7438	ABX Pentra Precitest Solution	1 x 15 mL
3100145498	A11A01851	ABX Pentra Dummy-E	1
1221040314	F10B40314	Sample cups adaptors	1
1221040189	F10B40189	Sample tray assy	1
1221040190	F10B40190	Reagent tray assy	1
1221040213	F10B40213	System water tank	1
1221040255	F10B40255	sampling needle	1
1221040318	F10B40318	Waste bag insertion tool	1
1221005964	F10B05964	Tool for needle	1
1221040092	F10B40092	Detergent container	10

4 x 99 mL

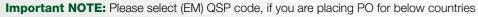


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Ι.	10010510	3 Years Std QSP2.0 Site License (EM)



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Pentraol

User Manual P/n: RAB080GEN



Instrument User Manual Update RAM207AEN

ABX Pentra 60 User Manual Update



Please, take note of the modifications on next pages. Please, cross out the appropriate sections in the user manual prior to inserting this addendum at the beginning of the user manual.

Date: 25/09/06

User Manual Update RAM207AEN

User Manual Update

Tab.1-1: Concerned sections of the ABX Pentra 60 user manual RAB080G

Section	Page	Paragraph	Item change
Specifications	1-17	5.3. Known interfering substances	Known interferences due to chemotherapy Interferences in the basophil count
	3-6	4. Running specimens	Recommendations on the analysis mode
Specimen Run & Results	3-26	5.3.3. Flags on WBC/BASO histogram	L1 Flag
	3-29	5.3.6. WBC balance	CBC mode limitations (WBC Balance)

1. WBC Balance



The WBC balance flags (LMNE+ and LMNE-) are activated only if the test selected is «DIFF» and if this flag has been activated. The WBC Balance can be enabled or disabled by an approved HORIBA ABX Service Technician. Contact your local HORIBA ABX Technical Service Representative for selection of this option.

These flags are associated with an (!) on all differential parameters (% and #).



The WBC balance flag will indicate an instrument defect or it can also highlight a known interference (see User manual).

In the case of pathology whose treatments weaken the leucocytic membranes, the agent of lysis of WBC channel can damaged the cells and give a lower leukocytes counting. The LMNE+ flag will then be triggered off and a suspicion will be integrated to the WBC results. We thus recommend not to disable WBC balance flag and to work in DIFF mode for all the samples which can present this possible interference. Selecting the CBC mode will disable this control mode. It is thus recommended to use this mode for patient not presenting this type of interference.

2. L1/LL1 Flag



In certain cases, the L1 flag will not be triggered off because of the poor sensitivity of this flag (large platelet aggregates and/or erythroblasts that are beyond the electronic threshold). This happens in CBC mode only. Two additional flags LL (see User manual) and LL1 (see User manual) are available in DIFF mode and provide more reliability in anomaly detection. This mode should be recommended.

3. Recommendations on the analysis mode selection (CBC or DIFF)

◆ When selecting CBC analysis, there is no control mode on WBC erroneous countings that may be caused by specific treatments on patients (see User manual) and WBC balance description (see User manual).

4. Known interfering substances

4.1. WBC

Chemotherapy: Cytotoxic and immunosuppressive drugs may increase the fragility of the leukocyte membranes which may cause low WBC counts. In these particular cases, CBC mode must not be used as WBC balance alarm (see User manual) is disabled. It is recommended to run these samples in DIFF mode.

4.2. Basophil

Over evaluation in the Basophil count

- Excessive number of leukocytes (leukocytosis) can cause artificial rise in the number of counted basophils due to the shifting of the leukocyte population in the zone of the basophil one.
- ◆ Monocytes and Blasts show large granules and may shift on the basophil counting area. This may interfere with an accurate count.
- ◆ An abnormally low number of leukocytes (leukopenia) may increase too the basophil results. The elements present in the zone of basophil are brought back on a small total quantity of leukocytes, which increases the statistical error and may cause variabilities in the percentage.
- ◆ The weakness of leukocyte cells shown in certain diseases (Chronic Lymphocytic Leukemia) or during anti-cancer treatment (chemotherapy) can be translated on the basophilic channel by under evaluation of the leukocytes because of their destruction and thus cause a statistical increase in the basophil ones.

Under evaluation in the Basophil count

- ◆ During leukemia, basophils may lose their cytochemical characters and react abnormally with the reagent. The destruction of the basophil cytoplasms prevents their differentiation with the other leukocytes.
- ◆ The basophils with very small sizes (following treatments) may interfere with leukocyte counts, as cell sizes can not be distinguished.
- ◆ The abnormal basophils (degranulation following allergies) may interfere with leukocyte counts, because cell sizes can not be distinguished and because they may lose their characteristic intracytoplasmic material.

ABX Pentra 60

User Manual



P/n: RAB080GEN





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REVISIONS

INDEX	TECHNICAL NOTE	REVISION	SECTIONS	DATE
Α		CREATION	ALL	15/06/1999
В	RAH670AA	BASOPHIL FLAG+MISCELLANEOUS CORRECTIONS	S ALL	03/11/1999
С	RAH739AA	LINEARITY LIMITS	1+5	24/05/2000
D	RAH764AA	SOFTWARE RELEASE V2.0	ALL	25/09/2000
Е	RAH986AA	SOFTWARE RELEASE V2.1.6	ALL	24/09/2003
F	RAN193A	SOFTWARE RELEASE V2.2.0	RAM145A	26/07/2005
G	RAN153B	COMPANY NAME CHANGE	ALL	02/09/2005

- This document applies to the latest software version as indicated above.
- When a subsequent software version changes the information in this document, a new section and/or sections will be released.
- · Latest version documents on www.horiba-abx.com.
- Declaration of conformity Latest version of the CE declaration of conformity for this instrument is available on www.horiba-abx.com.

1. WARNINGS AND PRECAUTIONS



NOTE: Emphasizes the important information especially helpful to the operator before, during or after a specific operational function.



IMPORTANT: Emphasizes an operating procedure that must be followed to avoid erroneous results.



CAUTION: Emphasizes an information that must be followed to avoid possible damage to the instrument or erroneous results.



WARNING: Flags a procedure that if not followed properly, can prove to be extremely hazardous to either the operator or the environment or both.

1.1. Warnings

- User manual must be entirely read and personnel trained by HORIBA ABX before attempting to operate instrument. The user always operates with full knowledge and appreciation of instrument warnings, alarms and flags. Always refer to labeling and HORIBA ABX instructions in order to avoid to compromise system integrity.
- The ABX PENTRA 60 responds to the Standards and Directives named in the declaration of conformity.
- The reagents and accessories stipulated by *HORIBA ABX* have been validated in accordance with the European Directive for in-vitro medical devices (98/79/CE).
- The use of any other reagents and accessories may place at risk the performance of the instrument, engaging the Users reponsability. In this case, *HORIBA ABX* takes no responsability for the device nor for the results rendered.
- Disposal gloves, eyes protection and lab coat must be worn by the operator. Local or national regulations must be applied in all the operations.
- Portable/mobile should not be used in proximity of the instrument.
- All peripheral devices should be IEC compatible.

1.2. Limited garantee

- The duration of guarantee is stipulated in the Sales conditions associated with the purchase of this instrument. To validate the guarantee, ensure the following is adhered to:
- 1 The system is operated under the instructions of this manual.
- 2 Only software or hardware specified by *HORIBA ABX* is installed on the instrument. This software must be the original copyrighted version.
- 3 Services and repairs are provided by an *HORIBA ABX* authorized technician, using only *HORIBA ABX* approved spare parts.
- 4 The electrical supply of the laboratory follows the national regulations.
- 5 Specimens are collected and stored in normal conditions.
- 6 Reagents used are those specified in this user manual.
- 7 Proper tools are used when maintenance or troubleshooting operations are performed.

CAUTION

If this instrument has been supplied to you by anyone other than HORIBA ABX or an authorised representative, HORIBA ABX cannot guarantee this product in terms of specification, latest revision and latest documentation. Further information may be obtained from your authorised representative.

1.3. Safety precautions, electronic and moving parts

- The following parts must not be handled or checked by the user:
- Electrical power supply,
- Electronic components.
- Operator injury may occur from an electric shock. Electronic components can shock and injure the user. Do not tamper with the instrument and do not remove any components (covers, doors, panels and so on) unless otherwise instructed within this document.
- Danger! The battery may explode if it is not replaced correctly! Replace only with the same or equivalent type recommanded by the manufacturer. Dispose of used batteries according to the manufacturer's instructions.
- Moving parts:

It is strictly forbidden to disable sensors as it may cause operator injuries. Protection covers must not be opened during instrument operations.

1.4. Biological risks

- Consider all Specimens, Reagents, Calibrators, Controls, etc... that contain human blood or serum as potentially infectious! Use established, good laboratory working practices when handling specimens. Wear protective gear, Gloves, Lab coats, Safety glasses and/or Face shields, and follow other bio-safety practices as specified in OSHA Blood borne Pathogens Rule (29 CFR part 1910. 1030) or equivalent bio-safety procedures.
- HORIBA ABX uses disinfectant product for instrument decontamination and highly recommends to decontaminate regularly your instrument.

1.5. Instrument cleaning

Instrument external cleaning

• The external surfaces of the instrument must be decontaminated considering the biological environment.



Never spill liquid on the instrument.

Never use Disinfectant product* that contains alcohol.

- Screen: Use a soft clot, slightly wet with disinfectant product*. Wipe gently the screen and dry to remove any trace of moisture.
- All contaminated surfaces (covers, counting assembly area...): Slightly wet a sponge with disinfectant product* and wipe the dirty surfaces.
- Stainless steel parts: Slightly wet a sponge with disinfectant product* and wipe the dirty surfaces. Dry with a soft cloth.
- * Products having the following microbiological properties:
- Bactericidal
- Fungicidal
- · Active on Aspergillus fumigatus
- Active on Mycobacterium tuberculosis (B.K)
- Antiviral (VIH, HBV and rotavirus)

Product Example validated by HORIBA ABX: ANIOS detergent disinfectant; WIP'ANIOS; ref: 1316.424



Please also refer to the W.H.O (World Health Organization) guidelines: «Laboratory Biosafety Manual, 2nd edition», for further information.

Instrument internal cleaning

• Concentrated cleaning: Counting chambers and hydraulics parts are decontaminated by using the "Concentrated cleaning" function as described further in this manual.

Sampling probe

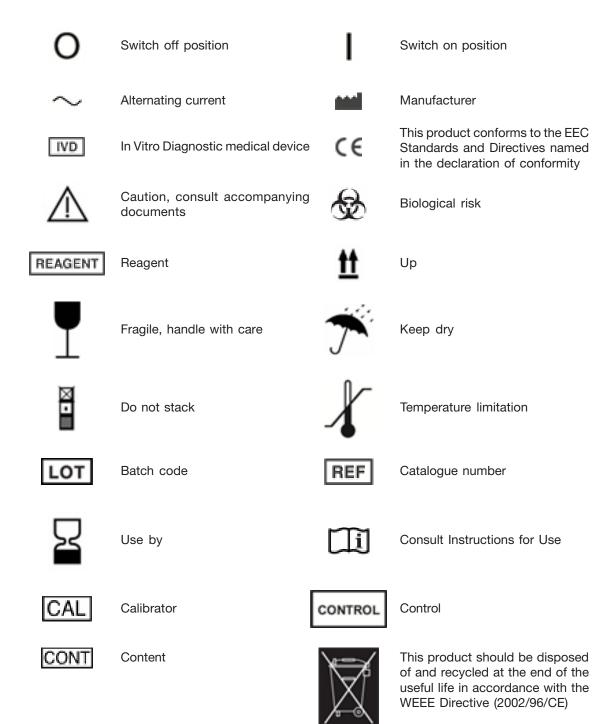
- Sampling probe must be decontaminated as follows:
- 1- Prepare a solution of Sodium Hypochlorite to 100ml/l.
- 2- Fill a 5ml tube with this solution.
- 3- Run 5 analysis on bleach.



Please also refer to the W.H.O (World Health Organization) guidelines: «Laboratory Biosafety Manual, 2nd edition», for further information.

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1.6. Graphics and symbols



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2. WORKING CONDITIONS

2.1. Environment

• The operation of the *ABX PENTRA 60* should be restricted to indoor location use only! Operation of the instrument at altitudes of over 3000 Meters (9800 feet) is not recommended. The instrument is designed for safety from voltages surges according to INSTALLATION CATEGORY II and POLLUTION DEGREE 2 (IEC EN 61010-1).

Please contact your local *HORIBA ABX* representative for any information regarding the operation location when it does not comply with the recommended specifications.

2.2. Location

• The ABX PENTRA 60 should be placed on a clean and levelled table or workbench. Please note that the ABX PENTRA 60, printer and reagents weigh approximately 40 kilograms (88 lbs).

Avoid exposure to sunlight.

Place your instrument where it is not exposed to water or vapor.

Place your instrument where it is free from vibration or shock.

Place your instrument where an independent power receptacle can be used. Use a receptacle different from the one used by a device that easily generate noise such as a centrifuge, etc...

- Provide a space of at least 20 cm (8 inches) at the back of the instrument for arranging the power cable and tubings.
- The Power switch and Input voltage supply connection should always be accessible! When positioning the system for operational use, leave the required amount of space for easy accessibility to these items.

2.3. Grounding

• Proper grounding is required when installing the system. Check the wall outlet ground (Earth) for proper grounding to the facilities electrical ground. If you are unsure of the outlet grounding, contact your facilities engineer to verify the proper outlet ground!

2.4. Humidity and temperature conditions

• ABX PENTRA 60 must operate between temperatures of 16 to 34°C (61 to 93°F). Maximum relative humidity should be 80% for temperatures up to 31°C (88°F) and decreasing linearly to 50% relative humidity at 40°C (104°F). If the system is kept at a temperature of 10°C (50°F) or less, it must be allowed to sit at room temperature for 1 hour before it can be used for operation.

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2.5. Electromagnetic environment check

• The ABX PENTRA 60 has been designed to produce less than the accepted level of electromagnetic interferences in order to operate in conformity with its destination, allowing the correct operation of other instruments also in conformity with their destination.

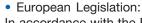
In case of suspected electromagnetic noise, check that the instrument has not been placed in the proximity of electromagnetic fields or short wave emissions, i. e. Radars, X-rays, Scanners, Cell phones, etc...

2.6. Environmental protection

- Disposal Used accessories and consumables must be collected by a laboratory specialized in elimination and recycling of this kind of material according to the local legislation.
- Disposal ABX PENTRA 60 instrument:

It should be disposed of in accordance with local legislation and should be treated as being contaminated with blood. The appropriate biological precautions should be taken.

If any doubt, please contact your HORIBA ABX representative service department.





In accordance with the European Directive (2002/96/CE, known also as WEEE), instruments having this symbol, and sold into a European country by HORIBA ABX or an authorised representative must be disposed of and recycled correctly at the end of its useful life. Due to the local changing regulations in each country, please contact your local representative for detailed and upto date information on how to appropriately dispose of the instrument.

2.7. Transport and storage conditions

Storage temperature: -20°C +50°C



Prior to the shipping of an instrument by transporter, whatever the destination, an external decontamination of the instrument must be carried out.

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2.8. Installation

 \bullet An HORIBA ABX representative will install your instrument, computer, software and printer.

2.9. Package content

• Verify that all of the parts from the package list are present:

ABX PENTRA 60						
1x RAB080XXX User manual						
1x XAA473A EPSON LX300+ printer						
1x	Pentra 60					
1x DACOXXA	Supply cable					
1x XEA791A	Installation kit					

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1. TECHNICAL SPECIFICATIONS

- The ABX PENTRA 60 is a fully automated hematology analyzer used for in vitro diagnostic testing of whole blood specimens.
- The ABX PENTRA 60 is able to operate either in CBC mode (Cell Blood Count: 12 parameters) or in CBC + 5DIFF mode (5 population Differential count: 26 parameters).

1.1. Parameters

1.1.1. CBC Mode

WBC	White Blood Cell
RBC	Red Blood Cell
Hgb	Hemoglobin concentration
Hct	Hematocrit
MCV	Mean Corpuscular Volume
MCH	Mean Corpuscular Hemoglobin
MCHC	Mean Corpuscular Hemoglobin Concentration
RDW	Red Distribution Width
Plt	Platelets
PDW *	Platelet Distribution Width
MPV	Mean Platelet Volume
Pct *	Plateletcrit

^{*} PDW and PCT have not been established as indications for this product, in the United States. The use of PCT and PDW should be restricted to research and Investigational measurements only.

1.1.2. CBC + 5DIFF Mode

WBC	White Blood Cell			
LYM	Lymphocytes % and #			
MON	Monocytes % and #			
NEU	Neutrophils % and #			
EOS	Eosinophils % and #			
BAS	Basophils % and #			
LIC *	Large Immature Cell % and #			
ALY *	Atypical Lymphocyte % and #			
RBC	Red Blood Cell			
Hgb	Hemoglobin concentration			
Hct	Hematocrit			
MCV	Mean Corpuscular Volume			
MCH	Mean Corpuscular Hemoglobin			
MCHC	Mean Corpuscular Hemoglobin Concentration			
RDW	Red Distribution Width			
PIt	Platelets			
PDW *	Platelet Distribution Width			
MPV	Mean Platelet Volume			
Pct *	Plateletcrit			

^{*} PCT, PDW, ALY and LIC have not been established as indications for this product, in the United States. The use of PCT, PDW, ALY and LIC should be restricted to research and Investigational measurements only.

1.1.3. Units

UNITS							
	WBC	RBC	HGB	HCT	PLT	MCV	
STD	10 ³ /mm ³	10 ⁶ /mm ³	g/dl	%	10 ³ /mm ³	μm³	
SI	10 ⁹ /I	10 ¹² /l	g/l	1/1	10 ⁹ /l	fl	
mmol/l	10 ⁹ /l	10 ¹² /l	mmol/l	I/I	10º/l	fl	
	MCH	MCHC	RDW	MPV	PCT	PDW	
STD	pg	g/dl	%	μm³	%	%	
SI	pg	g/l	%	fl	10 ⁻² /l	%	
mmol/l	fmol	mmol/l	%	fl	10 ⁻² /l	%	
	LYC	LYC	MON	MON	NEU	NEU	EOS
STD	%	#	%	#	%	#	%
SI	%	#	%	#	%	#	%
mmol/l	%	#	%	#	%	#	%
	EOS	BAS	BAS	ALY	ALY	LIC	LIC
STD	#	%	#	%	#	%	#
SI	#	%	#	%	#	%	#
mmol/l	#	%	#	%	#	%	#

[•] To select the set of units, refer to Chapter 4. Instrument configuration.

1.2. Throughput Analyses

- 1.3. Tube Identification
 - · By means of the worklist or identification file.
 - By means of the Barcode labels.

1.4. Reagents

- ABX DILUENT (20 litres),
- ABX CLEANER (1 litre, Integrated),
- ABX EOSINOFIX (1litre, Integrated),
- ABX BASOLYSE II (1 litre, Integrated),
- ABX ALPHALYSE or LYSEBIO (0.4 litre, Integrated).

1.5. Keyboard & Display

- HORIBA ABX specific keyboard, silicone made.
- LCD, 128 x 240 pixels, LED Backlighted.

1.6. Data processing

- 68331 type microprocessor.
- RS232C output.

1.7. Measurements and computation

- Impedance for WBC, Plt, RBC, BASO.
- Photometry for Hgb.
- Impedance and light scattering for LYM, MON, NEU, EOS, ALY and LIC.
- Computation from stored data that was directly measured for Hct, MCV, MCH, MCHC, RDW, MPV, Pct, PDW.

2. PHYSICAL SPECIFICATIONS

2.1. Power requirements

2.2. Operating temperature and humidity

- 16 34°C (61 93°F) room temperature.
- Maximum relative humidity 80% for temperatures up to 31°C (88°F) decreasing linearly to 50% relative humidity at 40°C (104°F).

2.3. Dimensions and Weight

2.4. Minimum specimen volume

```
    CBC Mode (CBC): ......* 30µl
    CBC + 5DIFF Mode (DIF): .....* 53µl
```

2.5. Dilution ratios

•	WBC/BASO	1/200
•	LMNE	1/80
•	RBC/Plt	1/10 000
•	Hgb	1/250

2.6. Hgb measurement

- Hgb chamber, LED 555 nm.
- Modified Drabkin method (cyanmethemoglobin)
- Light source Electroluminescent diode
- Wavelength 550nm ± 10nm

2.7. Counting aperture diameters

WBC/BASO 80 μm
 LMNE 60 μm
 RBC/Pit 50 μm

2.8. Reagent consumption (ml)

CYCLE		REAG	ENT			A PPROXIMATE
	DILUENT	BASOLYSE II	CLEANER	Eosinofix	A LPHALYSE	DURATION
CBC Cycle	20.4	2.1	0.9	Х	0.4	60"
Diff Cycle	25.6	2.1	0.9	1	0.4	60"
Startup*	60.8	2.1	3.7	1	1.4	3'53"
Shutdown	20.5	Х	14	Х	1	2'48"
Prime Diluent	42.9	Х	Х	Х	Х	3'03"
Prime Cleaner	1.1	Х	24.8	Х	Х	1'22"
Prime Eosinofix	1.6	Х	Х	23.6	Х	1'12"
Prime Basolyse II	1.1	23.6	1.1	Х	Х	1'20"
Prime alphalyse	2.1	Х	Х	Х	8.4	1'27"
Prime all reagents	47	24	25.1	24	8.2	6'
Autoclean cycle	14.2	1	1	1	0.3	1'38"
Autocontrol cycle	23.4	Х	1.4	Х	1	1'4"
RBC chamber cleaning	2.5	Х	Х	Х	Х	7"
Unprime all	Х	Х	Х	Х	Х	6'25"
Chambers rinsing	12.6	1	1	1	0.3	1'17"
Cytometer rinsing	4.9	Х	Х	Х	Х	1'11"
Concentrated cleaning	25	Х	1.4	Х	0.9	4'10"
Cleaning	12.6	1	1	1	0.3	1'19"

^{*} for one background count only (maxi = 3)

3. SUMMARY OF PERFORMANCE DATA

3.1. Precision (Reproducibility)*

- The instrument was initially calibrated with Minocal Calibrator (Lot No. CX322).
- Three levels of ABX MINOTROL material (Lot No: JX108) were run in duplicate once daily for a prolonged period on all parameters.

The results were used to quantify within run precision, and Total Precision in accordance with the NCCLS EP 5-A Guidelines.

PARAMETER	ABX MINOTROL CONTROL	WITHIN RUN SD	SD of RUN MEANS	SD OF DAILY MEANS	Total Precision (SD)
	JX108 Low	0.001	N/A	N/A	0.001
WBC	JX108 Normal	800.0	N/A	N/A	0.013
	JX108 High	0.031	N/A	N/A	0.045
	JX108 Low	0.000	N/A	N/A	0.000
RBC	JX108 Normal	0.001	N/A	N/A	0.001
	JX108 High	0.002	N/A	N/A	0.003
	JX108 Low	0.001	N/A	N/A	0.001
HGB	JX108 Normal	0.002	N/A	N/A	0.007
	JX108 High	0.005	N/A	N/A	0.012
	JX108 Low	0.021	N/A	N/A	0.025
HCT	JX108 Normal	0.064	N/A	N/A	0.122
	JX108 High	0.104	N/A	N/A	0.181
	JX108 Low	6.271	N/A	N/A	20.646
PLT	JX108 Normal	40.229	N/A	N/A	72.103
	JX108 High	154.146	N/A	N/A	381.388
PARAMETER	ABX MINOTROL	WITHIN RUN	CV% of run	CV% OF DAILY	Total
	CONTROL	CV%	MEANS	MEANS	PRECISION (CV%)
	JX108 Low	1.8	N/A	N/A	1.93
WBC	JX108 Normal	0.9	N/A	N/A	1.12
	JX108 High	0.9	N/A	N/A	1.05
	o/(100 mg/)	0.0		14/71	
	JX108 Low	0.8	N/A	N/A	0.86
RBC					
RBC	JX108 Low	0.8	N/A	N/A	0.86
RBC	JX108 Low JX108 Normal	0.8 0.6	N/A N/A	N/A N/A	0.86 0.79
RBC HGB	JX108 Low JX108 Normal JX108 High	0.8 0.6 0.7	N/A N/A N/A	N/A N/A N/A	0.86 0.79 0.88
	JX108 Low JX108 Normal JX108 High JX108 Low	0.8 0.6 0.7 0.4	N/A N/A N/A N/A	N/A N/A N/A N/A	0.86 0.79 0.88 0.57
	JX108 Low JX108 Normal JX108 High JX108 Low JX108 Normal	0.8 0.6 0.7 0.4 0.3	N/A N/A N/A N/A N/A	N/A N/A N/A N/A N/A	0.86 0.79 0.88 0.57 0.59
	JX108 Low JX108 Normal JX108 High JX108 Low JX108 Normal JX108 High	0.8 0.6 0.7 0.4 0.3 0.4	N/A N/A N/A N/A N/A	N/A N/A N/A N/A N/A	0.86 0.79 0.88 0.57 0.59 0.60
HGB	JX108 Low JX108 Normal JX108 High JX108 Low JX108 Normal JX108 High JX108 Low	0.8 0.6 0.7 0.4 0.3 0.4	N/A N/A N/A N/A N/A N/A	N/A N/A N/A N/A N/A N/A	0.86 0.79 0.88 0.57 0.59 0.60
HGB	JX108 Low JX108 Normal JX108 High JX108 Low JX108 Normal JX108 High JX108 Low JX108 Normal	0.8 0.6 0.7 0.4 0.3 0.4 0.9 0.7	N/A N/A N/A N/A N/A N/A N/A	N/A N/A N/A N/A N/A N/A N/A	0.86 0.79 0.88 0.57 0.59 0.60 0.99
HGB	JX108 Low JX108 Normal JX108 High JX108 Low JX108 Normal JX108 High JX108 Low JX108 Low JX108 Normal	0.8 0.6 0.7 0.4 0.3 0.4 0.9 0.7	N/A N/A N/A N/A N/A N/A N/A N/A	N/A N/A N/A N/A N/A N/A N/A N/A	0.86 0.79 0.88 0.57 0.59 0.60 0.99 0.97 0.89

^{*} Source: 510K submission K030144.

Precision claims*

PARAMETER	% CV	Nominal Values
WBC	< 2.0%	10.0 x 10³/mm³
RBC	< 2.0%	4.67 x 10 ⁶ /mm ³
HGB	< 1.0%	13.6 g/dl
HCT	< 2.0%	36.0 %
PLT	< 5.0%	243 x 10 ³ /mm ³

^{*} Source: 510K submission K030144.

3.2. Precision (Repeatability)

• Based on 10 consecutive samples of the same fresh whole blood sample without alarm:

Parameters	%CV	Test level
WBC	<2%	at 10x103/mm3
RBC	<2%	at 5x10 ⁶ /mm ³
Plt	<5%	at 300x103/mm3
Hgb	<1%	at 15 g/dL
Hct	<2%	at 45%

3.3. Linearity limits*

- **Linearity range**: The Manufacturer's tested linearity zone of the instrument using linearity kits and/or human blood.
- Linearity limits: Maximum and minimum values within instrument returns no dilution alarm.
- **Visible range**: Range values given by the instrument. These values (above linearity limits) are given as an indication. They are given associated with a «D» flag. This Visible range is outside Manufacturer's range.
- Linearity kits: Linearity was tested using available «Low Range» and «Full Range» Linearity Test kits. The Test kits were analyzed and data was computed according to the Manufacturer's instructions.
- **Human Blood**: Linearity was also obtained on human blood, using a minimum of 5 dilution points. The results of this study are as follows:

PARAMETER	LINEARITY RANGE	LINEARITY LIMITS	Visible R ange	ERROR LIMIT
WBC (10 ³ /μΙ)	0.40 to 130.80	0 to 120	120 to 150	±0.3 ±7.5%
RBC (10 ⁶ /μl)	0.23 to 9.76	0 to 8	8 to 18	±0.07 ±3%
HGB (g/dl)	0 to 31.06	0 to 24	24 to 30	±0.3 ±3%
HCT (%)	1.80 to 88.90	0 to 67	67 to 80	±2 ±3%
PLT (10 ³ /µl)	3.30 to 2007	0 to 1900	1900 to 2800	±10 ±12.5%
(for Hgb≥2g/dl)				
PLT (10 ³ /μl)	7 to 2895	0 to 2800	2800 to 3200	±10 ±12.5%

^{*} Source: 510K submission K030144.

3.4. Carry-over*

(for Hgb<2g/dl & Plt>15x103/mm3)

• The ABX PENTRA 60 carry-over effects were evaluated by assaying a sample with high cell concentrations three consecutive times (i1-3), followed immediately by testing a diluted sample consecutively 3 times (j1-3).

Carry-over =
$$\frac{(j1-j3)}{(i3-j3)}$$
X 100

Carry-over % is then:

	WBC	RBC	HGB	PLT
Mean low levels	1.06	1.58	5.28	31.33
Mean high levels	58.81	6.37	22.03	1106.67
Carry-over %	-0.260	0.000	-0.179	-0.186

This is the method as described in *Guidelines for the Evaluation of blood cell* analyzers including those used for differential leukocyte and reticulocyte counting and cell marker applications. ISLH, 14 January, 1994.

Carry-over Conclusion:

Results provided are extremely satisfactory. In order to provide for eventual possibilities within the laboratory environment the following claims shall be made:

	WBC	RBC	HGB	PLT
Claims	< 2.0%	< 2.0%	< 2.0%	< 2.0%

^{*} Source: 510K submission K030144.

3.5. Normal ranges*

PARAMETERS	MALE	FEMALE
WBC (10 ³ /μL)	4 - 10	4 - 10
RBC (10 ⁶ /μL)	4.50 - 6.50	3.80 - 5.80
HGB (g/dL)	13.0 - 17.0	11.5 - 16.0
HCT (%)	40.0 - 54.0	37.0 - 47.0
MCV (µm³)	80 - 100	80 - 100
MCH (pg)	27.0 - 32.0	27.0 - 32.0
MCHC (g/dL)	32.0 - 36.0	32.0 - 36.0
RDW (%)	11.0 - 16.0	11.0 - 16.0
PLT (10 ³ /μL)	150 - 500	150 - 500
MPV (µm³)	6 - 11	6 - 11
PCT (%)	0.15 - 0.50	0.15 - 0.50
PDW (%)	11 - 18	11 - 18
NEU (%)	50 - 80	50 - 80
LYM (%)	25 - 50	25 - 50
MON (%)	2 - 10	2 - 10
EOS (%)	0 - 5	0 - 5
BAS (%)	0 - 2	0 - 2



Expected values will vary with sample population and/or geographical location. It is highly recommended that each Laboratory establish its own Normal ranges based upon the local population!

* Bibliography:

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Faculté de médecine de Créteil (Paris XII)

3.6. Accuracy*

• The data shows good correlation between results achieved on the *ABX PENTRA* 60 versus the reference system, which can be resumed as follows:

PARAMETER	R ² (Comparison of means)	Accuracy Claims
WBC	0.997	>0.95
PLT	0.998	>0.95
RBC	N/A	N/A
HGB	N/A	N/A
HCT	N/A	N/A
LYM	N/A	N/A
NEU	N/A	N/A
MON	N/A	N/A
EOS	N/A	N/A
BAS	N/A	N/A

^{*} Source: 510K submission K030144.

3.7. Leukocyte differential count

• Not available at the time of publication.

3.8. Sample stability study

• Not available at the time of publication.

3.9. Results exceeding instrument capacities

RESULTS DISPLAYED						
PARAMETER	LINEARITY LIMITS	Visible Range	> VISIBLE RANGE			
WBC	«result»	«result+D»	DIL			
RBC	«result»	«result+D»	DIL			
HGB	«result»	«result+D»	DIL			
HCT	«result»	«result+D»	DIL			
PLT (for Hgb≥2g/dl)	«result»	«result+D»	DIL			
PLT (for Hgb<2g/dl &	«result»	«result+D»	DIL			
Plt>15x103/mm3)						

NOTE

Use the instrument diluent to dilute the sample if a ---- D flag occurs on WBC or Hct.

RESULTS TRANSMITTED OR PRINTOUT						
PARAMETER	LINEARITY LIMITS	VISIBLE RANGE	> VISIBLE RANGE			
WBC	«result»	«result+D»	+ D			
RBC	«result»	«result+D»	+ D			
HGB	«result»	«result+D»	+ D			
HCT	«result»	«result+D»	+ D			
PLT (for Hgb≥2g/dl)	«result»	«result+D»	+ D			
PLT (for Hgb<2g/dl &	«result»	«result+D»	+ D			
Plt>15x103/mm3)						

• Results displayed and printed out:

«PLT-C» message indicates the triggering of the PLT extended linearity mode for an Hgb<2g/dl & Plt>15x10 3 /mm 3 between 1900x10 3 /µl and 2800x10 3 /µl.

• Results transmitted:

«C» message indicates the triggering of the PLT extended linearity mode for an Hgb<2g/dl & Plt>15x10³/mm³ between 1900x10³/ μ l and 2800x10³/ μ l.

4. REAGENTS SPECIFICATIONS

4.1. Reagent specifications

• In order for the instrument to operate correctly, high-quality reagents must be used. HORIBA ABX provides all the necessary reagents.



The HORIBA ABX reagents specified for this instrument have been approved in accordance with the European Directive 98/79/CE (Annex III) for in-vitro medical devices.

• The CD-Rom RAX055 delivered with your instrument provides Reagents, Controls and Calibrators leaflets/msds.

Latest versions of these documents are available on www.horiba-abx.com/documentation.

4.2. Waste handling precautions



When disposing of waste, protective clothing must be worn (lab coat, gloves, eye protection, etc...). Follow your local and/or national guidelines for biohazard waste disposal.

- If required, waste can be neutralized before being discarded. Follow your laboratory's protocol when neutralizing and disposing of waste.
- Dispose of the waste container according to the local or national regulatory requirements.

5. LIMITATIONS

WARNING

Whilst every effort is taken by HORIBA ABX to investigate and indicate all known interference's, it is by no means possible to guarantee that all interference's have been identified. At all times, results should be validated and communicated only once all information relating to the patient has been assessed and taken into account.

5.1. Maintenance

• In *Chapter 5. Maintenance & Troubleshooting*, specific maintenance procedures are listed. The maintenance procedures identified are mandatory for proper use and operation of the *ABX PENTRA 60*. Failure to execute any of these recommended procedures may result in poor reliability of the system.



Failure to execute any of these recommended procedures may result in poor reliability of the system.

5.2. Blood specimens

 Verification of any abnormal test result (including flagged results or results outside of the normal range) should be performed using reference methods or other standard laboratory procedures for conclusive verification of the results.
 The sections below list known limitations of automated blood cell counters which use the principles of impedance and light absorbance as principles of measurement.

5.3. Known interfering substances

WBC, White Blood Cells (Leukocytes)

WBC results that exceed the linearity limits of the system will require dilution of the blood sample (Leukemia sample followed by a leukopenia).

Re-assaying the diluted sample will help to obtain the correct assay value.

Unlysed Red Cells - In some rare instances, the erythrocytes in the blood sample may not be completely lysed. These non-lysed red blood cells may be detected on the WBC histogram with an L1 alarm or as an elevated baseline on the side (leading edge) of the lymphocytes population. Non-lysed erythrocytes will cause a falsely elevated WBC count.

Multiple myeloma - The precipitation of proteins in multiple myeloma patients may give high WBC counts.

Leukemia - A very low WBC count may result from this disease because of possible increased fragility of the leukocytes leading to destruction of some of these cells during counting. These white cell fragments will also interfere with the white cell differential parameters.

These white cell fragments will also interfere with the white cell partial differential parameters: LYM% + #, MON% + #, GRAN% + #. A suspiciously low WBC count may also be seen in patients with lymphocytic leukemias due to the presence of abnormally small lymphocytes which may not be counted by the instrument.

Chemotherapy - Cytotoxic and immunosuppressive drugs may increase the fragility of the leukocytes which may cause low WBC counts.

Cryoglobulins - Increased levels of cryoglobulin that may be associated with myeloma, carcinoma, leukemia, macroglobulinemia, lymphoproliferative disorders, metastic tumors, autoimmune disorders, infections, aneurism, pregnancy, thromboembolic phenomena, diabetes, etc..., which can increase the WBC, RBC or PLT counts and the HGB concentration. The specimen must be warmed up to 37°C (99°F) in a bain marie for 30 minutes and analyzed again immediately after (analyzer or manual method).

Macrothrombocytes - In excessive numbers may affect and increase Leukocyte numeration.

RBC, Red Blood Cells (Erythrocytes)

The red blood cell dilution contains all the formed elements in the blood: erythrocytes, leukocytes and platelets. During erythrocytes counting (red blood cells), platelets are not counted as their size falls below the minimum threshold.

Agglutinated erythrocytes - May cause a low incorrect RBC count. Blood samples containing the agglutinated red blood cells may be suspected by elevated MCH and MCHC values and shown by examination of the stained blood film.

Cold agglutinins - IgM immunoglobulins which are high in cold agglutinin disease may cause lower RBC and PLT counts and increase MCV.

Hgb (Hemoglobin)

Turbidity of the blood sample - Any number of physiological and/or therapeutic factors may produce high incorrect HGB results. To obtain accurate hemoglobin results when increased turbidity of the blood sample occurs, determine the cause of the turbidity and follow the appropriate method below.

High WBC - An extremely high WBC will cause excessive light scatter. In these cases use reference (manual) methods. The diluted sample should be centrifuged, and the supernatant fluid measured with a spectrophotometer.

High lipid concentration - A high concentration of lipids in the blood sample will give the plasma a «milky» appearance. This condition can occur with hyperlipidemia, hyperproteinemia (as in gammapathies) and hyperbilirubinemia. Accurate hemoglobin determinations can be achieved by using reference (manual) methods and a plasma blank.

Increased turbidity may also be seen in cases where the red blood cells are resistant to lysing. This condition will cause an incorrect high HGB result, but may be detected by observing the abnormal MCH, MCHC values, and the increased baseline on the leading edge of the WBC histogram. Erroneous hemoglobin results will cause the results of the MCH and MCHC to be incorrect as well.

Fetal bloods - The mixing of fetal and maternal bloods may produce a high inaccurate HGB value.

Hct (Hematocrit)

Red blood cells agglutination - May produce an inaccurate HCT and MCV values. Red blood cell agglutination may be detected by observing abnormal MCH and MCHC values, as well as by examination of the stained blood film. In such cases, manual methods may be required to obtain an accurate HCT value.

MCV (Mean Corpuscular Volume)

Red blood cells agglutination - May produce an inaccurate MCV value. Red blood cell agglutination may be detected by observing abnormal MCH and MCHC values, as well as by examination of the stained blood film. In such cases, manual methods may be required to obtain an accurate MCV value.

Excessive numbers of large platelets and/or the presence of an excessively high WBC count may interfere with the accurate determination of the MCV value. In such cases, careful examination of the stained blood film may reveal the error.

MCH (Mean Corpuscular Hemoglobin)

The MCH is determined according to HGB value and the RBC count. The limitations listed for the HGB and RBC will have an effect on the MCH and may cause inaccurate values.

MCHC (Mean Corpuscular Hemoglobin Concentration)

The MCHC is determined according to the HGB and HCT values. The limitations listed for the HGB and HCT will have an effect on the MCHC and may cause inaccurate values.

RDW (Red blood cell Distribution Width)

The red blood cell distribution width is determined according to the RBC count.

Nutritional deficiency or blood transfusion - May cause high RDW results due to iron and/or cobalamin and/or folate deficiency.

Plt (Platelets)

WBC fragments may interfere with the proper counting of platelets and cause elevated PLT counts.

Very small erythrocytes (microcytes), erythrocyte fragments (schizocytes).

Agglutinated erythrocytes - May trap platelets, causing an erroneously low platelet count. The presence of agglutinated erythrocytes may be detected by observation of abnormal MCH and MCHC values and by careful examination of the stained blood film.

Hemolysis - Hemolysed specimens contain red cell stroma which may increase platelet counts.

Giant platelets in excessive numbers - May cause a low inaccurate platelet count as these large platelets may exceed the upper threshold for the platelet parameter and are not counted.

Platelet agglutination - Clumped platelets may cause a decreased platelet count and/or a high WBC count. The specimen should be recollected in sodium citrate anticoagulant to ensure the anticoagulated character depending on agglutination and reanalyzed only for the platelet count. The final PLT result must be corrected for the sodium citrate dilution effect. However, these platelet clumps do trigger flags L1, LL and LL1.

A.C.D. blood - Blood anticoagulated with acid-citrate-dextrose may contain clumped platelet which could decrease the platelet count.

Chemotherapy - Cytotoxic and immunosuppressive drugs may increase the fragility of these cells which may cause low PLT counts. Reference (manual) methods may be necessary to obtain an accurate platelet count.

Elevated lipids and/or cholesterol - May interfere with correct platelet counting.

IMPORTANT

Blood samples collected
in EDTA will not
maintain a stable Mean
Platelet Volume.
Platelets collected in
EDTA swell depending
on the time postcollection and storage
temperature.

MPV (Mean Platelet Volume)

Giant platelets that exceed the upper threshold of the Platelet parameter may not be counted as platelets. Consequently, these larger platelets will not be included in the instrument's calculation of Mean Platelet Volume.

Very small erythrocytes (microcytes), erythrocytic fragments (Schizocytes) and white blood cell fragments may interfere with the proper counting and sizing of Platelets.

Agglutinated erythrocytes - May trap Platelets, causing an incorrect MPV result. The presence of agglutinated erythrocytes may be detected by observation of abnormal MCH and MCHC values and by careful examination of the stained blood film.

Chemotherapy - May also affect the sizing of PLTs.

LYM# (Lymphocyte count absolute value), LYM% (Lymphocyte percentage)

The Lymphocyte count is derived from the WBC count. The presence of erythroblasts, certain parasites and erythrocytes that are resistant to lysis may interfere with an accurate LYM count. Limitations listed for the WBC count pertain to the LYM# and % counts as well.

MON# (mononuclear cell count absolute), MON% (Mononuclear percentage)

The mononuclear cell count absolute is derived from the WBC count. The presence of large lymphocytes, atypical lymphocytes, blasts and an excessive number of basophils may interfere with an accurate monocyte count. Limitations listed for the WBC count pertain to the MON# and % counts as well.

NEU# (neutrophil count absolute), NEU% (Neutrophil percentage)

The neutrophils cell count is derived from the WBC cell count. The excessive presence of eosinophils, metamyelocytes, myelocytes, promyelocytes, blasts and plasma cells may interfere with an accurate neutrophils count.

EOS# (Eosinophil cell count absolute), EOS% (Eosinophil percentage)

The eosinophil cell count is derived from the WBC cell count. The presence of abnormal granules (degranulated areas, toxic granules...) may interfere with the eosinophil counting.

BAS# (Basophil cell count absolute), BAS% (Basophil percentage)

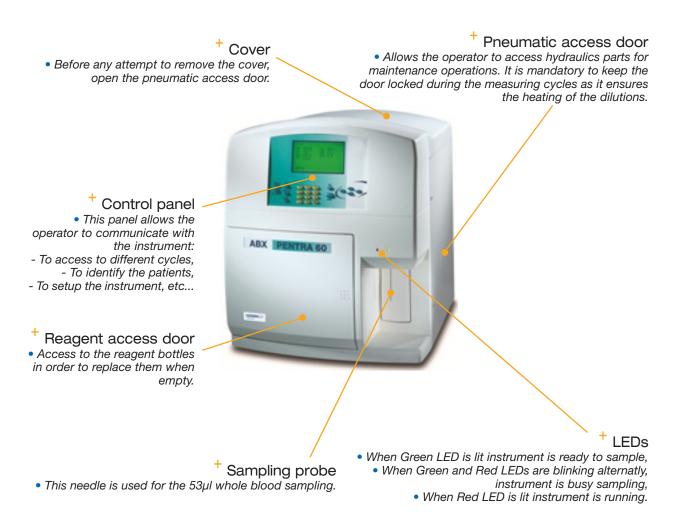
The Basophil cell count is derived from the WBC cell count.

DESCRIPTION & TECHNOLOGY

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1. PENTRA 60 DESCRIPTION

1.1. Pentra 60 general description



1.2. Pentra 60 back side



1.3. Mechanical and hydraulic modules

Piercing carriage

- Ensures needle positioning for the different sampling stages and distribution,
 - Supports the sampling syringe and the blood distribution.

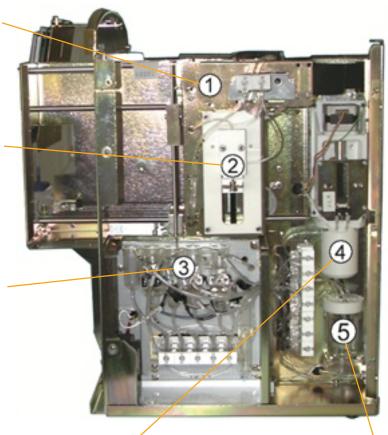
+ Sampling syringe

- Distributes portions of the specimen into the dilution chambers,
- Takes the sample from the first dilution and distributes it into the RBC/PLT chamber.

Count assembly

- Receives the different rinsings and dilutions,
 - Regulates the temperature of dilutions,
 - Provides the dilutions for WBC/ BASOS,

RBC/Plt and Hgb.



Draining syringe

- Drains the chambers,
- Bubbles the mixtures,
- Transfers, by vacuum, the LMNE specimen from the mixing chamber towards to the injector of the optical flowcell.

† Diluent tank

- Contains the necessary diluent for an analysis cycle,
 Prevents Diluent degassing as it is being aspirated by the syringes,
 - Is vacuum filled by the counting syringe.

Optical bench • Ensures the support and

adjustment of the flowcell, lamp, and optical and electronic elements.

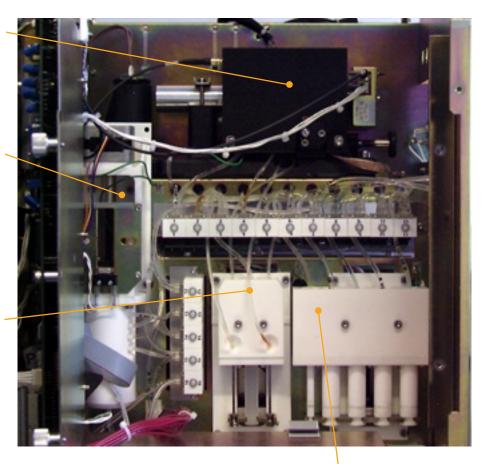
Counting syringe

- Ensures the vacuum for the WBC and BASOS counts,
- Ensures the vacuum for the RBC and the Plts counts,
- Ensures the vacuum for filling the diluent tank with diluent.

MNE Syringe assembly

 Ensures the correct proportioning of the stop diluent in the LMNE chamber, • Injects the specimen into the flowcell,

> • Injects the interior and exterior sheath into the flowcell.

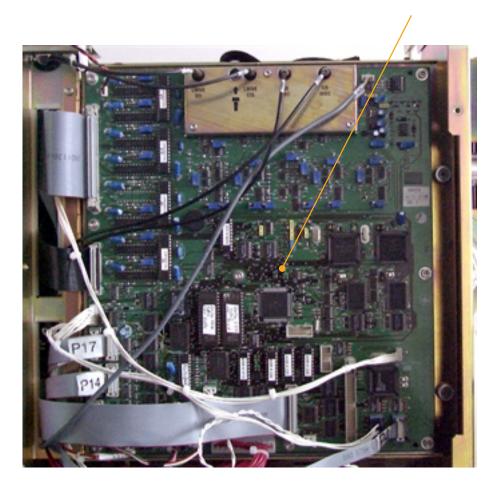


- Reagent Syringe assembly
 Ensures the correct proportioning of the reagents:
- Lysing reagent for hemoglobin (ABX ALPHALYSE), Cleaning reagent (ABX CLEANER),
 Lysing reagent for DIFF count (ABX EOSINOFIX),

 - Diluent used for the dilutions (ABX DILUENT) except the LMNE stop diluent,
- Lysing reagent for WBC/BASO (ABX BASOLYSE II).

⁺ Main board

Located on the left side of the instrument. The board is fastened onto a door in order to allow access to the fluidic modules.



Main functions of the board

- Amplifies, processes and counts the following signals:
- Resistive signals and LMNE optical signals,
- RBC signal,
- Plt signal, WBC/BASO signals.
- Measures hemoglobin.Pilots the motorised elements.



When opening the main board support panel, be careful not to disconnect or damage electric cables.

2. MEASURING PRINCIPLES

2.1. Multi Distribution Sampling System (MDSS)

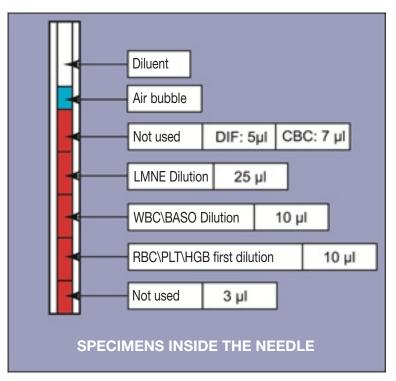
- + ABX PENTRA 60 analysis cycle needs 3 blood specimens distributed as follows:
- one specimen for the first RBC/Plt dilution and the Hgb measurement.
 - another specimen for the BASO/ WBC count.
 - the last specimen for the LMNE matrix.

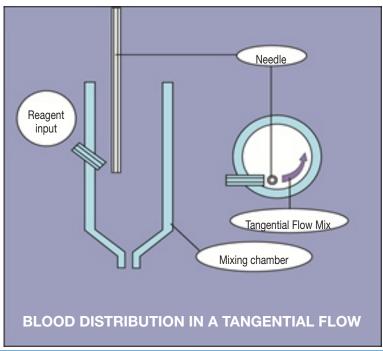
These 3 specimens are provided by means of a «multi distribution» principle:

• 53 µl of blood are aspirated inside the needle (sufficient volume for all dilutions) then divided up and distributed to the chambers with reagents.

 Extremities of the specimen are not delivered to the dilutions.

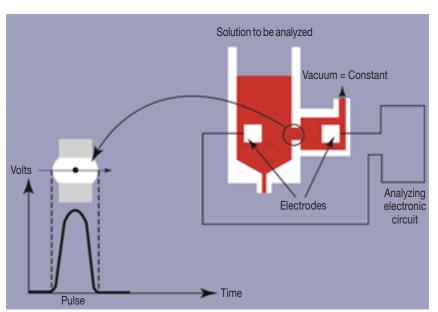
Specimen distribution in the chambers is carried out in a tangential flow of reagent which allows perfect mixing of the dilution and avoids any viscosity problems (this multi distribution in a reagent flow is an HORIBA ABX patent).



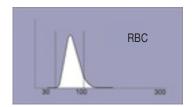


2.2. RBC / Plt detection principles

- Measurement of impedance variation generated by the passage of cells through a calibrated microaperture.
- The specimen is diluted in an electrolytic diluent (current conductor) and pulled through the calibrated microaperture. Two electrodes are placed on either side of the aperture. Electric current passes through the electrodes continuously.
- When the cell passes through the aperture, electric resistance between the two electrodes increases proportionately with the cell volume.
- The generated impulses have a very low voltage, which the amplification circuit increases, so that the electronic system can analyze them and eliminate the background noise.

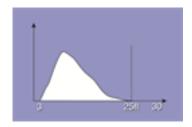


TECHNICAL CHARACTER COUNTS	ISTICS OF TH	E RED BLOOD CELI	L AND PLATELET		
Initial blood volume	10 µl	Method	Impedance		
Vol. ABX DILUENT	2500 µl	Aperture diameter	50 μm		
Final dilution rate**	1/10000	Count vacuum	200 mb		
Temperature of reaction	35°C	Count period	2 X 5 seconds		
**: Two successive dilutions are carried out:					
PRIMARY DILUTION FOR RBC AND PLT:					
Blood (µI): 10					
ABX DILUENT (μL):	1700	dilution:	1/170		
SECONDARY DILUTION RBC AND PLT (FROM THE PRIMARY DILUTION):					
Dilution (µI): 42.5					
ABX DILUENT(μL):	2500	dilution:	1/58.8		
FINAL DILUTION: 1/170	X 1/58.8	=1/10000			



Results

Number of cells counted per volume unit x Calibration coefficient.



Histograms

RBC: Distribution curves on 256 counting channels from 30fl to 300fl.

Plt: Distribution curves on 256 channels from 2fl to a mobile threshold. This threshold moves according to the microcyte population present in the analysis area.

2.3. Hgb measurement

During the analysis cycle, lysing reagent is released into the Dilution chamber.

Alphalyse

This reagent breaks down the RBC cell membrane and releases the hemoglobin within the cell. The hemoglobin, released by the lysing reagent, combines with the potassium cyanide from the lysing reagent to form a chromogenous cyanmethemoglobin compound. This compound is then measured through the optical part of the first dilution chamber by way of spectrophotometry at a wavelenght of 550 nm.

Lysebio

Reagent for erythrocyte lysis and cyanide-free determination of hemoglobin. All the heme iron is oxidized and stabilized producing chromogenic species for quantitation by spectrophotometry at a wavelength of 550 nm.

TECHNICAL CHARACTERISTICS FOR THE MEASUREMENT OF THE HEMOGLOBIN:				
Volume of blood	10 µl	Method	Photometry	
Volume ABX DILUENT	1700 µl	Wavelength	550 nm	
Volume LYSE	400 μΙ			
Complement ABX DILUENT	400 μΙ			
Final dilution rate	1/250			
Temperature of reaction	35°C			

Results

• Hemoglobin results are given as such: Absorbance value obtained from the sample x Coefficient of calibration.

2.4. Hct measurement

- The height of the impulse generated by the passage of a cell through the microaperture is directly proportional to the volume of the analyzed RBC.
- The hematocrit is measured as a function of the numeric integration of the MCV.

2.5. RDW calculation

• The study of the RBC distribution detects erythrocyte anomalies linked to anisocytosis.

A Red Cell Distribution Width (RDW) will enable you to follow the evolution of the width of the curve in relation to the cell number and average volume.

$$RDW = \frac{K SD}{MCV}$$

With:

- K = system constant.
- SD = determined Standard Deviation according to statistical studies on cell distribution.
- MCV = Mean Corpuscular Volume of erythrocytes.

2.6. MCV, MCH, MCHC calculation

- MCV (Mean Cell Volume) is calculated directly from the RBC histogram.
- MCH (Mean Cell Hemoglobin) is calculated from the Hgb value and the RBC number

The mean hemoglobin weight in each RBC is given by the formula:

$$MCH (pg) = \frac{Hgb}{RBC} x 10$$

• MCHC (Mean Corpuscular Hemoglobin Contained) is calculated according to the Hgb and Hct values. Mean Hgb concentration in the total volume of RBC is given by the formula:

$$MCHC (g/dL) = \frac{Hgb}{Hct} \times 100$$

2.7. MPV Measurement

• The MPV (Mean Platelet Volume) is directly derived from the analysis of the platelet distribution curve.

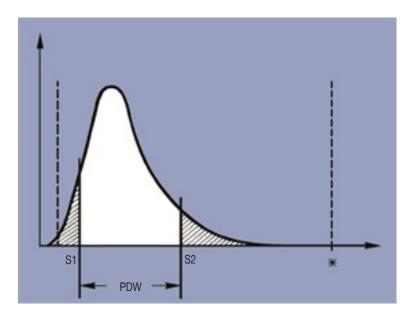
2.8. Pct calculation

• Thrombocrit is calculated according to the formula:

Pct% =
$$\frac{\text{Plt } (10^{3}/\mu \text{l}) \times \text{MPV } (\mu \text{m}^{3})}{10 \ 000}$$

2.9. PDW calculation

- PDW (Platelet Distribution Width) is calculated from the Plt histogram.
- The PDW is represented by the width of the curve between 15% of the number of platelets starting from 2fl (S1), and 15% of the number of platelets beginning with the variable top threshold (S2).



2.10. WBC and differential count

2.10.1. General principles

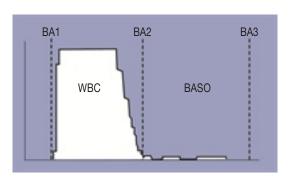
The WBC count is carried out twice by two different sensors:

- In the BASO count chamber at the same time as the BASOS count,
- In the optical chamber during the acquisition of the LMNE matrix.

The <u>reference count</u> is the one obtained in the WBC and BASO count chamber.

2.10.2. BASO / WBC Count

- Detection principle is the same as for RBC. Differentiation betwee BASOs and other leukocytes is obtained by means of the **BASOLYSE II** specific lysing action.
- All the WBCs are counted between the electrical threshold <0> threshold <BA3>. The basophils are located from threshold <BA2> to threshold <BA3>.



TECHNICAL CHARACTERISTICS OF THE WBC/BASO COUNT				
Blood volume	10 µl	Method	Impedance	
BASOLYSE II volume	2000 μΙ	Ruby diameter	80 µm	
Dilution rate	1/200	Depression of count	200 mb	
Reaction temperature	35°C	Duration of the count	2 X 6 seconds	

Results

WBC: Number of cells per volume x coefficient of calibration.

BASO: Number of cells per volume x coefficient of calibration in percentage regarding the total number of leukocytes (BASO + WBC nuclei).

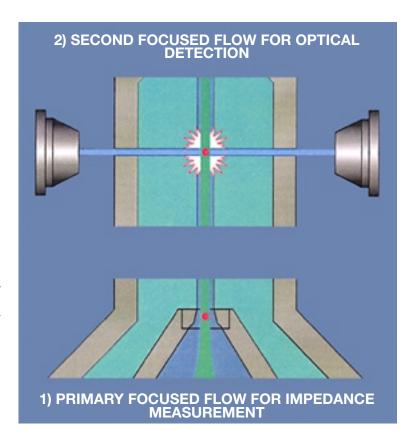
2.10.3. LMNE matrix

- The WBC and Differential count are based on 3 essential principles:
 - 1 The double hydrodynamic sleeving «DHSS» (HORIBA ABX patent).
 - 2 The volume measurement impedance changes.

3 - The measurement of transmitted light

with 0° angle, which permits a response according to the internal structure of each element and its absorbance by means of incident light diffusion.

- 25µl of whole blood is delivered to the LMNE chamber in a flow of EOSINOFIX. This reagent lyses the RBC, stabilizes the WBC in their native forms and stains the eosinophil nuclei with a specific coloration.
- The solution is then stabilized with diluent and transferred to the measuring chamber. Each cell is measured both in absorbance (cytochemistry) and resistivity (volume).

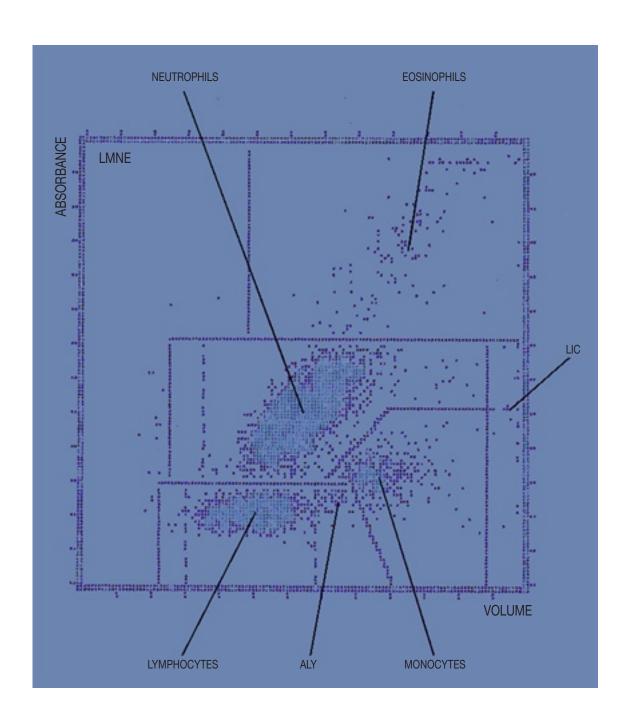


TECHNICAL CHARACTER THE MATRIX	RISTICS OF TH	E WBC COUNT DURING	THE ACQUISITION OF
Blood volume	25 µl	Method	Impedance
			with hydrofocus
Eosinofix volume	1000 µl	Ruby diameter	60 μm
Diluent volume	1000 μl	Flow diameter	42 μm
Final dilution rate	1/80	Injection duration	12 seconds
Reaction temperature	35°C	Volume injected	72 µl
Incubation duration	12 s.		

Results

• From these measurements, a matrix is drawn up with volumes on the X-axis and optical transmission on the Y-axis.

The study of the matrix image permits the clear differentiation of 4 out of 5 leukocyte populations. As a matter of fact, the basophil population is very small compared to the other 5 in a small blood sample.



RAB080GEN

MONOCYTES: The monocytes, being cells with large kidney shaped nuclei and a large non-granular cytoplasm, will neither be scattered nor absorb a large amount of light. They will therefore be positioned in the lower part of the optical axis but clearly to the right of the volume axis. Certain large monocytes can be found on the right side of the matrix in the lower LIC (Large Immature Cells) zone. The immature granulocytic cells are detected by their larger volumes and by the presence of granules which increase the intensity of the scattered light. Therefore, cells such as metamyelocytes will be found clearly to the right of the neutrophils and nearly at the same level. Myelocytes and promyelocytes will be found in saturation position on the far right of the matrix. These last three populations will be counted as LIC (Large Immature Cells) and their given results are included in the neutrophil value. The blast cells will be found generally to the right of the monocytes, and, as such, will increase the LIC count. Small blasts will be found between the normal lymphocytes and monocytes. Platelets and debris from erythrocyte lysis represent the background noise population located in the lower left area of the matrix. Most of the population partition thresholds are fixed and give the limits of the morphological normality of leukocytes. Changes in the morphology of a population will be expressed on the matrix by a shifting of the corresponding population.

LYMPHOCYTES: The lymphocytes being small with regular shape, are positioned in the lower part of both the optical axis and volume axis. Normal lymphocyte populations are generally observed with a good volume homogeneity. Large lymphocytes are detected in the ALY (Atypical Lymphocytes) zone, where reactive lymphoid forms, stimulated lymphocytes and plasmocytes are also to be found. The far left side of the lymphocyte zone should normally be empty, but when small lymphocytes are present, population may exist in this area. The presence of platelet aggregates is detected by a distribution pattern that moves from the origin of the matrix (background zone) into the lymphocyte zone. The NRBCs with their cytoplasmic membranes lysed like the erythrocytes, will have their nuclei situated to the far left side of the lymphocyte zone.

EOSINOPHILS: With reagent action on cytoplasmic membranes, the leukocytes keep their native size and only eosinophils are colored for optical separation. Eosinophils will be situated in the upper part of the optical Y-axis due to their strong absorbance qualities and their size, which is nearly equivalent to large neutrophils.

NEUTROPHILS: The neutrophils, with their cytoplasmic granules and their generally segmented nuclei, will scatter light depending on their morphological complexity. A hypersegmented neutrophil will give an increased optical response with respect to a young neutrophil population which will be in the upper position of the optical axis depending on the presence of segmentation and/or granules.

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1. INSTRUMENT START UP

1.1. Waste levels

- At the beginning of each day check if the waste container needs to be emptied. Be careful Wastes must be handled according to your local/national regulations.
- See Chapter 5. Maintenance & Troubleshooting to empty the waste container.

1.2. Printer start up

- Check the printer paper. If more printer paper is needed, replace the printer paper according to the *Printer user manual* supplied with the instrument.
- Press the ON/OFF switch. Check the control LEDs are ON.
- See Chapter 4. Instrument configuration to setup printing mode.

1.3. Pentra 60 start up

• Press the ON/OFF switch located on the left side of the instrument.



- A STARTUP cycle is run automatically:
- A rinse cyle is carried out.
- Then a background count (an analysis cycle on reagent without any blood specimen).





• If the background counts are not within acceptable limits the message **«STARTUP FAILED»** is displayed.

Background count limits:

 $WBC = 0.3 \times 10^3 / mm^3$

 $RBC = 0.03 \times 10^6 / mm^3$

Hgb = 0.3 g/dI

 $PIt = 7.0 \times 10^3 / mm^3$



The instrument will not operate if the reagent temperature is under 35°C (69°F). If required a bargraph is displayed after start up to check and wait for temperature progression.

• If a low reagent level is expected during the day, the message **«REAGENT LOW LEVEL»** is displayed.

Proceed as described in Chapter 5. Maintenance & Troubleshooting.



It is mandatory to power down the system if not used more than a 36 hour period. This eliminates the possibility of the dilution chambers evaporating, causing startup alarm.

2. SPECIMEN COLLECTION AND MIXING

• All blood samples should be collected using proper technique.



Consider all Specimens, Reagents, Calibrators, Controls, etc... that contain human blood or serum as potentially infectious! Use established, good laboratory working practices when handling specimens. Wear protective gear, Gloves, Lab coats, Safety glasses and/or Face shields, and follow other bio-safety practices as specified in OSHA Blood borne Pathogens Rule (29 CFR part 1910. 1030) or equivalent biosafety procedures.

- When collecting blood specimens, Venous blood is recommended, but Arterial blood may also be used in extreme cases. Blood collection must be placed in a Vacuum or atmospheric collection tubes.
- For additional information on collecting venous and capillary blood samples, refer to NCCLS document H3-A4 and NCCLS document H4-A4 (sept 1999).
- The sample collection tube has to be filled to the exact quantity of blood indicated on the tube itself. Any incorrectly measured blood sample collections will show a possible variation in the results.

2.1. Recommended anticoagulant

• The recommended anticoagulant is K3EDTA with the proper proportion of blood to anticoagulant as specified by the tube manufacturer.

K2EDTA is an acceptable alternative, as long as the sample collection is made in normal conditions.

Otherwise, blood clots may be possible.

2.2. Blood sample stability

• Specimens may be used between 15/20 minutes after collection. The results on all parameters depend on the mode of conservation of the sample. Depending on the parameter to be measured, the sample stability may be up to 48 hours.

2.3. Microsampling

• The «Open tube» sampling mode enables the user to work with 100µl microsamples (for pediatrics and geriatrics).

2.4. Mixing

• The blood samples must be gently and thoroughly mixed just before placing them into the tube holder and closing the tube holder door. This will ensure a homogeneous mixture for measurement.

3. CALIBRATION VERIFICATION (CONTROL BLOOD SAMPLING)



The calibration on HORIBA ABX instruments is an exceptional procedure, which must be carried out particularly in case of certain technical interventions (installation, maintenance, service intervention).

The calibration should not be carried out to compensate a drift on a result due for example to a clogging of the instrument.

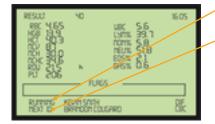
- Before carrying out a calibration, it is essential to make sure that the instrument is in perfect condition of operation, and to follow the steps below:
- 1- Carry out a concentrated cleaning (refer to the corresponding paragraph of the manual).
- 2- Perform two blank cycles to check the cleanliness of the instrument (if the blank measurement is not correct, please contact your *HORIBA ABX* Representative).
- 3- Check the repeatability of the instrument by running six times a normal human blood without taking account of the first result (if the repeatability is not correct, please contact your *HORIBA ABX* Representative).
- 4- Calculate the CV obtained out on the 5 results, the values of CV must be lower than those given in the manual.
- 5- Run a control blood and check that the values are within the acceptable limits. If not, run a new control.
- If the instrument is clean (blank cycles in conformity with the values given in the manual), that repeatability is correct (values of CV acceptable) and that the values of control are not within the acceptable limits, then it is possible to carry out a calibration:
- 6- Run at least 4 times Calibrator without taking the values of the first result into account.
- 7- Calibrate the instrument on the average of the last three results according to indications of the manual. Take care to respect the minimum and maximum calibration coefficient values given in the manual. Run 3 times again Calibrator to check the values.
- 8- Confirm the calibration while passing a blood of control, the values have to be returned within acceptable limits.
- 9- After about thirty analyses of the day, check that values of MCV, MCH and MCHC are in conformity with the usual values of the laboratory.

4. RUNNING SPECIMENS

- Two Identification modes are available (see *Chapter 4. Instrume'nt configuration* to configure the ID mode):
- **1 alphanumerical mode:** requires the patient (or control) identification on each analysis.
- 2 Sequence # mode: increments a sequence number on each analysis.

4.1. Alphanumerical mode

- Identification can be entered using the ____ and ___ (16 characters, letters or numbers) keys of the front panel.
- Press or for each letter to step to the next one.
- Press when the identification is correct.



- The identification of the current analysis is shown on the «RUNNING» field.

- The identification of the analysis to come is shown on the «NEXT ID» field.



If no identification has been entered, the analysis cycle will not start.

4.2. Sequence # mode



- Sequence # (from 1 to 99999) can be entered using the numeric keys of the front panel. Press to record the number.
- The sequence # of the current analysis is shown on the «RUNNING» field.
- -- The sequence # of the analysis to come is shown on the «NEXT ID» field.

4.3. Analysis mode selection



- Press to perform the selection between a CBC analysis or a DIF analysis:
- The mode on the current analysis is indicated on the right side of the screen as well as the mode on the analysis to come.

4.4. Analysis

• Present the specimen as shown on the beside diagram and press the sampling bar located behind the sampling needle or press the key.



• When the light indicator stops flashing, the LED turns to red, remove the tube.



• When the LED turns to green again, the instrument is ready for the next analysis.

4.5. Automatic cleaning

- When the instrument has run 75 specimens from the date changing, an automatic cleaning procedure is carried out.
- The automatic cleaning frequency can be adjusted by the user from 1 to 75 as described *Chapter 4. Instrument configuration*.

4.6. End of the day rinsing

- It is necessary to run a standby/shutdown cycle at the end of the day.
- Press the key, the instrument performs a complete cleaning with ABX **CLEANER**, and puts the system into the standby mode.
- The instrument can be switched off if the working day is completed or left in this standby mode overnight or until the next analysis.



A startup cycle is required systematically after a shutdown cycle if the instrument has to be operated.



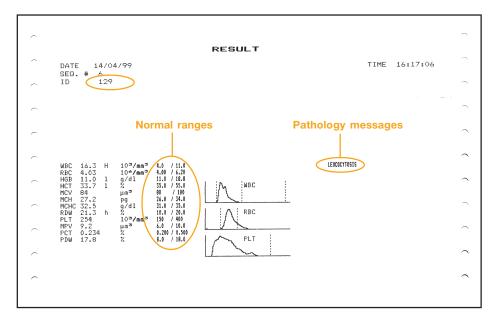
It is mandatory to power down the system if not used more than a 36 hour period. This eliminates the possibility of the dilution chambers evaporating, causing startup alarm.

5. RESULTS

- When the analysis cycle is completed, results are displayed and printed out according to the setup of the instrument *Chapter 4. Instrument configuration*:
- Printout configuration («PRINTER»)
- Sequence # mode or Alphanumerical mode («IDENTIFICATION MODE»)
- Unit setup («UNITS»)
- Possible flags («LAB LIMITS»).

5.1. CBC Mode

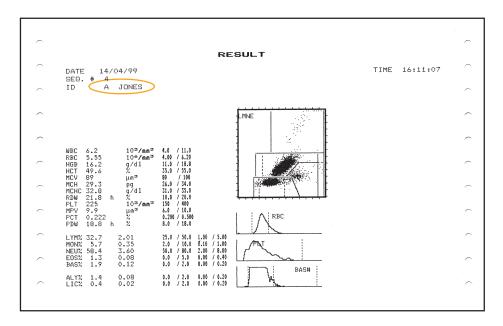
• IDENTIFICATION MODE: Sequence #

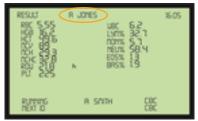




5.2. DIF Mode

• IDENTIFICATION MODE: Alphanumerical mode





5.3. Flags

These flags can be divided up into 5 different groups:

- Flags linked to a result when it exceeds the normality limits.
- Flags linked to a problem in the morphology of blood cell population.
- Flags linked to a result or to instrument operation leading to a «default analysis».
- Flags linked to instrument in use.

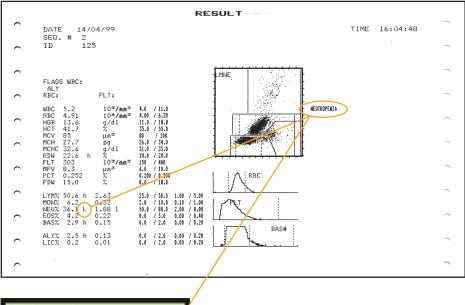


Each flag sensitivity can be adjusted by the operator (see Chapter 4.

Instrument configuration).

5.3.1. Normal and panic ranges

- $^{\rm w}\!h^{\rm w}$ indicates that the result is above the normal limit set by the user.
- «I» indicates that the result is below the normal limit set by the user.
- ${}^{\scriptscriptstyle{\text{\tiny W}}}\!\!H^{\scriptscriptstyle{\text{\tiny N}}}$ indicates that the result is above the panic limit set by the user.
- $\mbox{\ensuremath{\it \textit{«L}}}\mbox{\ensuremath{\it ``}}$ indicates that the result is below the panic limit set by the user.
- These flags may be criteria for the pathology messages.





Hgb blank

See Chapter 4. Instrument configuration to defined BHB# and MHB %.

- At the end of the Startup cycle, the Hgb blank value is controlled. If this value is not within acceptable limits, a reject flag (shown by *) is triggered on the Hgb parameter.
- On each analysis cycle, the instrument performs a Hgb blank on diluent and checks this measured against the Hgb reference value. If this Hgb blank value is too different from the mean of the reference values of previous analyzes (higher than BHB# defined by the user) the instrument triggers a suspiscion flag (shown by !) on the Hgb parameter.
- (!) is also associated with Hgb result if the difference between 3 successive measures on the same sample is higher than MHB % limit defined by the user.
- Sample has to be rerun.



No result will be given on Hgb [(----) instead] when 3 suspicion flags (!) associated with the Hgb reference value have been triggered off (MCHC and MCH are also not reported).

Reject (between two counts)

• A reject flag (shown by *) occurs when two counts on a parameter differ more than the pre-defined limits. It indicates that the result is not <u>coherent</u> and the sample has to be rerun.

• RBC

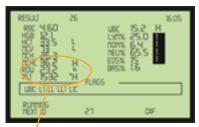
A reject on RBC gives a default analysis value, shown by a * on RBC, MCV, MCH, MCHC and RDW.

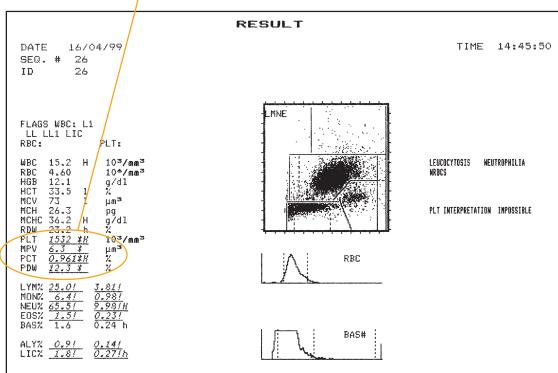
PIt

A reject on Plt gives a default analysis value, shown by a * on Plt, Pct, MPV and PDW.

• WRC

A reject on WBC gives a default analysis value, shown by a * on WBC and Diff # results.





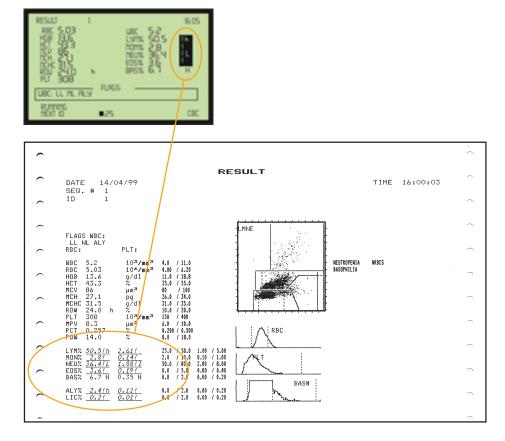
5.3.2. LMNE matrix flags

Suspiscion

- When populations are detected in abnormal quantity in one or several boxes of the matrix, some flags may occur associated with (!). If one result appears with one or several parameters associated with this (!), the result should be further investigated (pathology suspiscion, clotted sample, plasma cells...).
- Twelve different flags may occur regarding the shifting of leukocyte populations on the matrix channel or the presence of abnormal populations. These flags are: **Reject, NO, LL, LL1, NL, MN, RM, LN, RN, NE, ALY, GCI** (see flag signification further in this *Chapter*).

Reject (on LMNE matrix)

- A reject on the LMNE channel indicates a poor correlation between the resistive and the optical measurements on the matrix. It is shown by a (*) on all the differential parameters in % and #.
- The result is not reliable and specimen must be rerun.



NO flag

Meaning: Background NOise.

This flag occurs when the number of particles counted in the background noise area is higher than the limit set up in **NO#** or when the number of counted particles versus the total number of WBC, is above the **NO%** limit.

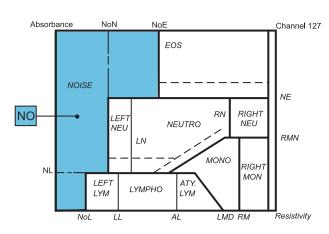
Suspected abnormalities:

- · Platelet aggregates,
- Large number of platelets,
- Erythrocyte membrane resistant to lysis (stroma),
- NRBCs,
- Pollution.

Standard values for NO:

% 100
120

Adjustment:
see Chapter 4. Instrument
configuration.



LL flag

Meaning: Left Lymphocytes

Presence of a significantly large population on the left-hand side of the lymphocyte area. This flag appears when the number of particles counted is higher than the limit set up in **LL#** or when the number of counted particles versus the total number of WBC exceeds the **LL%** limit.

Suspected abnormalities:

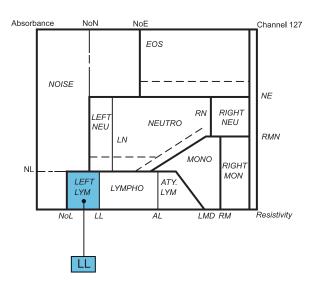
- · Small lymphocytes,
- · Platelets aggregates,
- NRBCs,
- Erythrocyte membrane resistant to lysis (stroma).

This flag occurs associated with an (!) on:

- LYM % LYM #
- NEU % NEU #
- MON % MON #
- EOS % EOS #
- ALY % ALY #
- LIC % LIC #

Standard values for LL:

% 100 # 50



LL1 flag

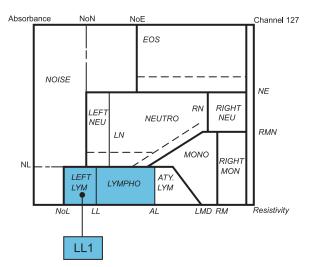
Meaning: Left Lymphocytes 1

Presence of a significantly large population of cells on the left-hand side of the lymphocytes area. This flag occurs when the number of particles counted is higher than the limit set up in **LL1#** <u>and</u> when the number of particles counted in **LL** regarding to the total number of lymphocytes is above the **LL1%** limit.

Suspected abnormalities:

- · Platelet aggregates,
- NRBCs,
- Erythrocyte membrane resistant to lysis (stroma),
- Stroma,
- · Small abnormal lymphocytes.

Standard values for LL1: %5 # 45



NL flag

Meaning: Neutro/Lympho

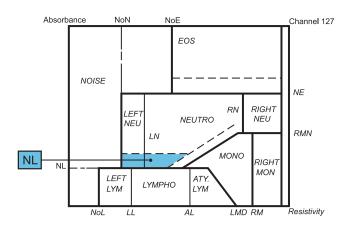
Presence of a significantly large population of cells located in the separation threshold area between lymphocytes and neutrophils. This flag occurs when the number of particles counted in this area is higher than the limit set up in **NL#**, or when the number of counted particles regarding to the total number of WBC is above **NL%** limit.

Suspected abnormalities:

- · Small neutrophils without granules and/or slightly segmented,
- · Lymphocytes with a segmented nucleus or Activated Lymphocytes,
- · Neutrophils with membrane weakness.

This flag occurs associated with an (!) on:

- LYM % LYM #
- NEU % NEU #



MN flag

Meaning: Mono/Neutro

Presence of a significantly large population of cells located in the separation threshold area between monocytes and neutrophils. This flag occurs when the number of particles counted in this area is higher than the limit set up in **MN#** or the number of particles counted in MN versus the total number of WBC is above the **MN%** limit.

Suspected abnormalities:

- Monocytes having granules in their cytoplasm or hyperbasophilic monocytes,
- Young neutrophils with non-segmented nuclei (bandcells).

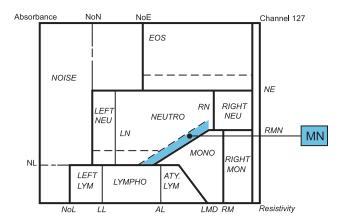
This flag occurs associated with an (!) on:

- ALY % ALY #
- LIC % LIC #

and replaces:

• NEU %, NEU #, MON %, MON # by ----.

+ **Standard** values for **MN**: % 100 # 120



LN flag

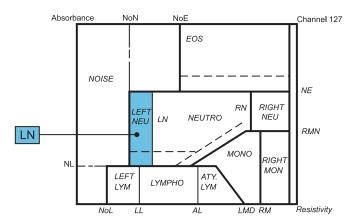
Meaning: Left Neutro

Presence of a significantly large population of cells located on the left-hand side of the neutrophil area. This flag occurs when the number of particles counted in this area is higher than the limit setup in **LN#** or when the number of particles counted regarding the total number of WBC is above **LN%** limit.

Suspected abnormalities:

- Neutrophil destruction due to incorrect storage of the sample or an old sample,
- · Contamination, stroma or platelet aggregates.

This flag occurs associated with an (!) on all WBC differencial parameters.



NE flag

Meaning: Neutro/Eosino.

Presence of a significantly large population of cells located in the separation area between neutrophils and eosinophils because of a superimposition of the 2 populations. This flag occurs when the number of particles counted in this area is higher than the limit setup in **NE#** or when the number of particules counted regarding the total number of WBC is above the **NE%** limit.

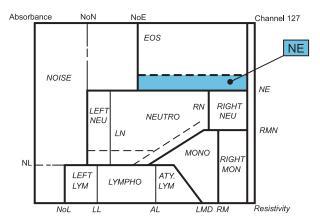
Suspected abnormalities:

- Young eosinophils,
- Giant hypersegmented neutrophils,
- Eosinophils with low intracytoplasmic material,
- Immature cells.

This flag is associated with an (!) on:

- LIC % LIC #
- and replaces:
- NEU %, NEU #, EOS %, EOS # by ----.

Standard values for **NE**: % 1.1 # 60



ALY flag

Meaning: Atypical Lymphocytes

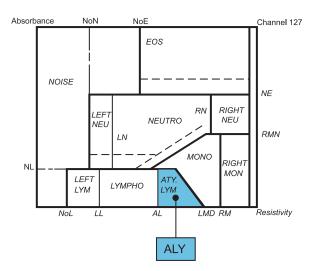
Presence of a significantly large population of cells located on the right-hand side of the Lymphocytes area. This flag occurs when the number of particles counted in this area is higher than the limit setup in **ALY#** or when the number of particles counted regarding the total number of WBC is above the **ALY%** limit.

Suspected abnormalities:

- · Large Lymphocytes,
- · Reactive Lymphoid forms,
- · Stimulated Lymphocytes,
- Plasmocytes.

+ Standard values for ALY: % 2

% 2 # 0.2



RM flag

Meaning: Right Mono

Presence of a significantly large population of cells located on the right-hand side of the monocyte area (low LIC). This flag occurs when the number of particles counted in this area is higher than the limit setup in **RM#** or when the counted particles regarding the total of WBC is above **RM%** limit.

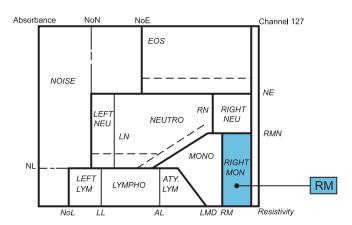
Suspected abnormalities:

- · Large monocytes,
- Hyperbasophilic monocytes,
- · Myelocytes or promyelocytes,
- · Large blasts.

This flag occurs associated with an (!) on:

- •NEU % NEU #
 •MON % MON #
 •LIC % LIC #
- Standard values for RM:

% 1.1 # 999



RN flag

Meaning: Right Neutro

Presence of a significantly large population of cells located on the right-hand side of the neutrophil area (high LIC). This flag occurs when the number of particles counted in this area is higher than the limit setup in RN# or when the number of particles counted regarding the total number of WBC is above the RN% limit.

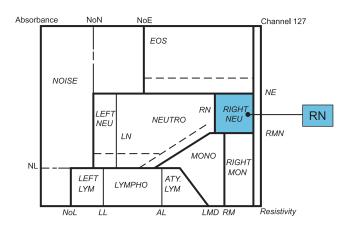
Suspected abnormalities:

- · Large neutrophils,
- Immature cells from granulocyte hemopoiesis (metamyelocytes, myelocytes, promyelocytes).

This flag is associated with an (!) on:

- NEU % NEU #
- LIC % LIC #

Standard values for RN: % 1.1 # 999



LIC flag

Meaning: Large Immature Cells

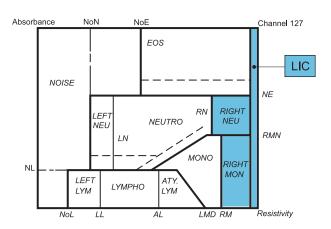
Presence of a significantly large population of cells located on $\mathbf{RN} + \mathbf{RM} + \mathbf{channel}$ 127 areas. This flag occurs when the number of particles counted in this area is higher than the limit set up in $\mathbf{LIC\#}$, or when the number of counted particles regarding to the total number of WBC is above the $\mathbf{LIC\%}$ limit.

Suspected abnormalities:

- · Large monocytes,
- · Hyper basophilic monocytes,
- Myelocytes, Metamyelocytes, Promyelocytes,
- · Large blasts,
- · Large neutrophils.

% 2 # 0.2 Adjustment: see Chapter 4. Instrument configuration.

Standard values for LIC:



5.3.3. Flags on WBC/BASO histogram

CBC and DIFF Mode

L1 flag is established according to the ratio of the cells counted between the 0 channel and BA1.

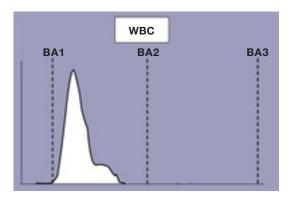
L1 indicates the presence of an abnormal number of cells in comparison with leukocytes.

Suspected abnormalities:

- Plt aggregates,
- NRBCs.

Standard values for L1: % 3 # 200

Adjustment: see Chapter 4. Instrument configuration.



DIFF mode only

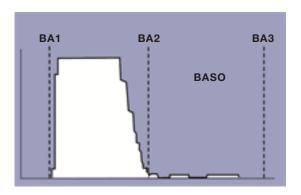
MB (Meaning: Mono Baso)

This flag occurs when the percentage of basophils found in the Baso channel is above the percentage of Lympho/Mono/Neutro raw counts found on the matrix channel.

BASO+

If the BASO % exceeds 50%, a **BASO+** flag is generated.

The Basophils are not taken away from the matrix populations and ---- is displayed instead of the BAS % and BAS #.



5.3.4. Flags on RBC histogram

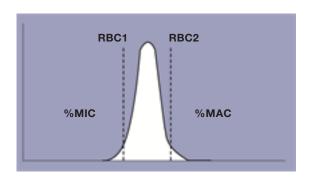
MIC & MAC flags

MIC and **MAC** flags are generated when the percentage of cells counted in the microcytic area (MIC) and macrocytic area (MAC) compared to the total number of RBCs are above the limits set up by user.

• RBC1 and RBC2 thresholds define the microcytic and macrocytic areas and are calculated according to the MCV and the RDW.

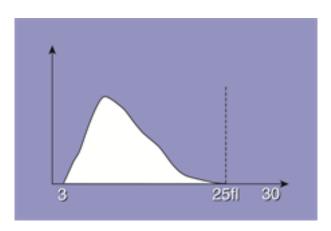
** **Standard** values for ** **Mic**: % 5 ** **Mac**: % 45

Adjustment: see Chapter 4. Instrument configuration.



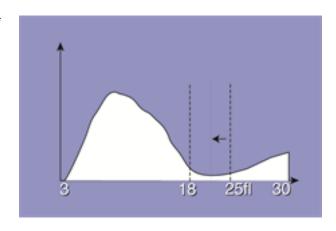
5.3.5. Flags on Plt histogram

• The Plt histogram has 256 channels between 2fL and 30fL. A mobile threshold (at 25fL by default) moves according to the microcytic RBCs present in the platelet analysis area.

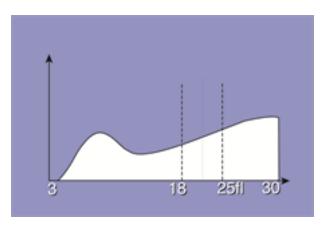


• The Plt flags are generated under the following conditions:

An excessive presence of particles on the right side of the threshold area (after 25fL) will generate the MIC (Microcytes) flag (shown in the platelet alarm area). In this case the mobile threshold looks for a valley between 18fL and 25fL (standard area).



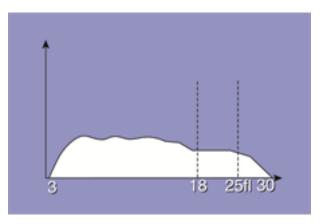
When the mobile threshold can not be positioned in the standard area (from 18fL to 25fL), a **Plt** reject (*) and a **MIC** flag are generated. The Plt result is not reliable. Verify the result using a Platelet Rich Plasma (PRP) or a manual count.



+ If the mobile threshold cannot be positioned (no valley between the Plt and RBC histograms) the SCH (Schizocytes) flag is generated.

Suspected abnormalities:

- Presence of schizocytes,
- Presence of Platelet aggregates, check the result on a slide.



SCL (Small Cell) indicates the presence of small cells in the 2fL and 3fL zone. A second analysis should be carried out and the results verified.

5.3.6. WBC balance

**WBC Balance can be activated or deactivated: see Chapter 4. Instrument configuration.

Control of the injected volume in the optical flowcell allows a second count of the WBC.

The two counts are compared, if the difference between both counts is higher than a defined threshold (depending of the quantity measured), a **LMNE+** or a **LMNE-** flag is generated.

• WBC count is within 0 and 2501:

If the WBC LMNE count is higher than 50% of the WBC BASO count, a **LMNE+** flag is generated.

If the WBC LMNE count is lower than 50% of the WBC BASO count, a **LMNE**-flag is generated.

• WBC count is within 2501 and 8000:

If the WBC LMNE count is higher than 20% of the WBC BASO count, a **LMNE+** flag is generated.

If the WBC LMNE count is lower than 20% of the WBC BASO count, a **LMNE**-flag is generated.

WBC count is higher than 8000:

If the WBC LMNE count is higher than 15% of the WBC BASO count, a **LMNE+** flag is generated.

If the WBC LMNE count is lower than 15% of the WBC BASO count, a ${\bf LMNE}{}$ -flag is generated.

The WBC BASO channel is considered as a reference and is used to calibrate the WBC LMNE channel. The ratio calculated between the two channel calibration coefficients is, except technical intervention, stable. In any case it is the WBC BASO result that is reported.



The WBC balance flags (LMNE+ and LMNE-) shall not be triggered if and only if:

- The test selected is «CBC».
- The WBC Balance option is not activated.

These flags are associated with an (!) on all differential parameters (% and #). L1 flag is associated with an (!) on WBC value and on absolute values of the differential parameters.

5.4. Pathology messages

• Pathology suspicion messages may be displayed and printed out. Triggering conditions are linked to the laboratory limits entered by the user.



These messages indicate a possible pathological disorder and should be used to assist with quick and efficient screening of abnormal samples and for diagnosis. It is recommended to use suitable reference methods to confirm diagnoses.



There is no pathological message in the following cases:

- On WBC: For a WBC < 0.1x10³mm³ or WBC > 91.3x10³/mm³ or for a counting reject (except if an Erythroblast flag is the NUCLEATED RBC).
- On RBC: For a counting reject or an RBC value < 0.1x10⁶/mm³.
- On Plt: For a counting reject or a Plt value < 5x103/mm3.

5.4.1. WBC messages

«H»: high extreme limit

«L»: low extreme limit

MESSAGE	Triggering Condition
LEUKOCYTOSIS	WBC > WBC H
LEUKOPENIA	WBC < WBC L
LYMPHOCYTOSIS	* LYM # > LYM # H or if LYM % > LYM % H
LYMPHOPENIA	* LYM # < LYM # L or if LYM $\%$ < LYM $\%$ L
NEUTROPHILIA	* NEU # > NEU # H or if NEU % > NEU % H
NEUTROPENIA	* NEU # < NEU # L or if NEU % < NEU % L
EOSINOPHILIA	* EOS # > EOS # H or if EOS % > EOS % H
MYELEMIA	NEU % > NEU % H and LIC # > LIC # H
LARGE IMMATURE CELL	LIC # > LIC # H or LIC % > LIC % H
ATYPIC LYMPHOCYTE	ALY # > ALY # H or ALY % > ALY % H
LEFT SHIFT	(MN or NL) and RN
NUCLEATED RBC	Ш
MONOCYTOSIS	* MON # > MON # H or if MON % > MON % H
BASOPHILIA	* BAS # > BAS # H or if BAS % > BAS % H
BLASTS	BAS # > BAS # H and LIC # > LIC # H and RM

* means the pathology is detected, firstly, on the high and low absolute values of the corresponding parameter.

5.4.2. RBC messages

«H»: high extreme limit

«L»: low extreme limit

Message	TRIGGERING CONDITIONS
ANEMIA	Hgb < Hgb L
ANISOCYTOSIS	RDW > RDW H
MICROCYTE	on MIC flag
MICROCYTE+	% MIC > 10 %
MICROCYTE++	% MIC > 15 %
MACROCYTE	on MAC flag
HYPOCHROMIA	MCHC < MCHC L
COLD AGGLUTININ	MCHC > MCHC H and WBC < 91.3x10 ³ /mm ³
MICROCYTOSIS	MCV < MCV L
MACROCYTOSIS	MCV > MCV H
ERYTROCYTOSIS	RBC > RBC H

5.4.3. Plt messages

«H»: high extreme limit

«L»: low extreme limit

Message	Triggering Conditions
THROMBOCYTOSIS	PIt > PIt H
THROMBOCYTOPENIA	Plt < Plt L
MICROCYTOSIS	See Triggering conditions for these flags
SCHIZOCYTE	in paragraph <i>Flags on RBC curve</i>
SMALL CELL	
PIt AGGREGATE (1)	Plt < 150x10 ³ /mm ³ + WBC Reject or
	NO + PDW > 20 or
	NO + MPV > 10 or
	$NO + Plt < 150x10^3/mm^3$ or
	NO + WBC Reject or
	L1 or LL1 + PDW > 20 or
	L1 or LL1 + MPV > 10 or
	L1 or LL1 + PIt < 250x10 ³ /mm ³
ERYTHROBLASTS (2)	LL or WBC reject + L1 or WBC reject + LL1
ERYTHROBLASTS	(1) and (2) are false + (L1 or LL1 or WBC reject)
PIt AGGREGATE	
MACROPLATELETS	MPV > 11

5.4.4. Miscellaneous

«H»: high e	xtreme limit
-------------	--------------

«L»: low extreme limit

Message	Triggering Conditions
PANCYTOPENIA	WBC < WBC L
	and RBC < RBC L
	and Plt < Plt L

5.5. Analyzer alarms

Total rejection of the matrix

Meaning: poor correlation

The percentage of validated cells is abnormally low, appears when the correlation between the resistivity measurement of particles and their optical measurement is less than 50%.

Suspected abnormalities:

- · Stroma interfering with measurement,
- Strong pollution,
- Incorrect adjustment of the optical bench.

Others

• From LMNE Matrix: NO flag

From WBC Balance: LMNE+; LMNE From WBC/BASO Histogram: BASO+

6. CALIBRATION

- Two modes are available:
- 1. AUTOCALIBRATION: using calibration blood samples.
- **2. CHANGE COEFFICIENT**: calibration coefficients are known and can be entered directly.

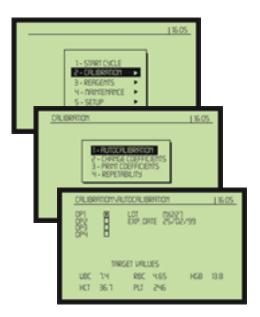
6.1. Autocalibration

• When the **«3. Calibration verification**» has failed, calibrate the instrument as follows:

6.1.1. Operator selection

- Enter the «AUTOCALIBRATION» menu.
- Move the cursor to one of the 4 required operator identifications.
- Press ____ to validate the selection.
- See Chapter 4. Instrument configuration to change the operator identification.

6.1.2. Change lot number



- Move the cursor to «LOT» field if this one has to be changed. If not perform the «6.1.3. Change expiration date».
- Press : the cursor turns to a flashing «_» below the figures or letters to replace.
- Use and and to display the letters and numerical keyboard to display the figures.
- Press to validate the lot number.

6.1.3. Change expiration date

- Move to the «EXP DATE» field if this one has to be changed. If not perform the «6.1.4. Change target values».
- Proceed as described in «6.1.2. Change lot number» to enter the new date.
- See Chapter 4. Instrument configuration to change the date format.

6.1.4. Change target values

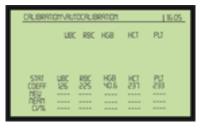
- Move to the «TARGET» field if the this one has to be changed. If not press directly.
- Enter the new WBC target value if required, and press _____.



- The menu turns to RBC target value.
- Repeat the same procedure for RBC, HGB, HCT, PLT.
- When this last value has been modified press : the calibration results chart table is displayed.

6.1.5. Run calibration

- Prepare the calibrator according to the specific instructions (temperature, mixing, etc...).
- Open the vial and position the sampling needle deeply inside the bottle.
- · Press the sampling bar located behind the needle.
- When the cycle LED stops flashing, remove the vial and replace the cap on the calibrator.
- When the analysis cycle ends, the first result is displayed on the result chart table.
- Run the second calibrator sample.





- The calibration of the ABX PENTRA 60 can be performed on 3 to 11 analyses.
- The autocalculation module performs statistics on these results in order to obtain the best calibration coefficients.



Risk of erroneous results if the calibrator is not continuously mixed between each analysis. Continue mixing the calibrator between each analysis. In order to obtain the best possible calibration, it is recommended to run at least 5 calibrator samplings.

Interpretation:

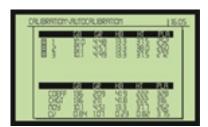


- Currently, each result is selected: i.e. that this one is involved in the statiscal calculation.
- To discard a result from the statiscal calculation, move the cursor to the result line and press ____ to obtain a single square.
- Use the and and oscroll up and down on the results chart table.
- The instrument calculates the statistical calibration factors for each parameter:
- Recall of the previous coefficient of calibration
- Calculation of the new coefficient of calibration
- Mean of the results
- Coefficient of variation
- Press



A- Calibration passed

- If the statistic figures are within the acceptable limits:
- Coefficient of variation is within the limits setup as described *Chapter 4. Instru*ment configuration and,
- The percentage difference between the target and the mean value is less than 20.



The calibration passed:

• Press to save the new coefficients.

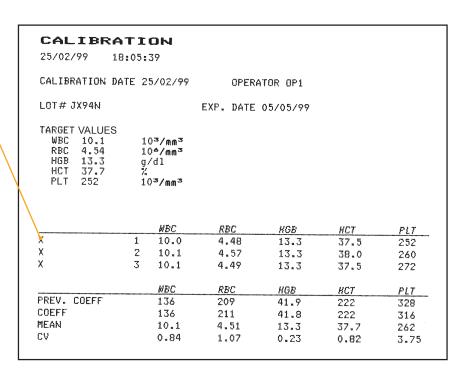


Press to print the new coefficients.

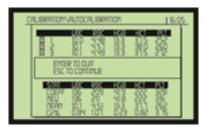




The results involved in the statistical calculations are shown wih a «x» in the first column.



The calibration is completed, press to quit the calibration chart table.



B- Calibration forced

If the statistic figures are not within the acceptable limits:

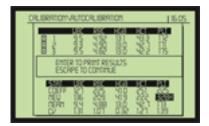
- · Coefficient of variation is not within the limits or,
- The percentage difference between the target and the mean value is greater than 20.



 The out of range coefficient is shown in reverse video and a flag «H» (higher) or «L» (lower) is displayed next to it. • Press to save the new coefficients: **the calibration is forced**, (or to quit and save the previous coefficients).



- Press to print the new coefficients: a message «Forced calibration» is printed out on the calibration print form.
- Press to quit the calibration chart table.



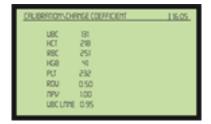
The results involved in the statistical calculations are shown wih a «x» in the first column.

CALIBRA	TION				
25/02/99 17	:55:24				
CALIBRATION DA	TE 25/02/99	OPERA	TOR OP1		
FORCED CALIBRA	TION				
LOT# JX94N		EXP. DATE	05/05/99		
TARGET VALUES WBC 10.1 RBC 4.54 HGB 13.3 HCT 37.7 PLT 252	103/mm3 104/mm3 g/dl % 103/mm3				
	MBC	RBC	KGB	HCT	PLT
X	1 9.5	4.92	13.1	43.3	172
X	2 9.3	4.90	13.0	42.7	171
X	3 9.5	4.82	13.0	42.2	175
	NBC	RBC	НGВ	HCT	PLT
PREV. COEFF	127	225	41.0	251	225
COEFF	136	209	41.9	222	328 H
MEAN	9.4	4.88	13.0	42.7	173
CV	1.31	1.07	0.32	1.27	1.39

6.2. Change coefficients

- · Calibration can be achieved directly by changing the calibration coefficients when they are known.
- Move the cursor to function «CHANGE COEFFICIENTS» and press





- A specific password is requested to enter the function.
- Enter the «User password» (defined as described Chapter 4. Instrument configu-



• Move the cursor down to the WBC, RBC, HGB, HCT, PLT and RDW positions and enter the required new coefficients.



As the WBC LMNE parameter is automatically calibrated by the WBC balance (see section 4 - WBC balance), only an HORIBA ABX certified technician is allowed to change it.

 When the required coefficients have been changed, press the setup.



CALIBRATION			
COEFFICIENT	STD VALUE	MINIMUM	MAXIMUM
WBC	137	90	200
RBC	225	160	290
HGB	40.0	25.0	55.0
HCT	220	160	290
PLT	290	180	400
RDW	0.35	0.1	0.9
MPV	1.00	0.1	10

· RDW can be calibrated by means of calibration coefficients. These coefficients are incremented to 0.35 by default. The RDW is calculated according to the below formula:

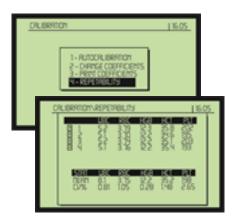
RDW result = RDW coeff x RDW calculated

6.3. Print coefficients

Move to «PRINT COEFF» and press to print out the coefficients.

6.4. Repeatability

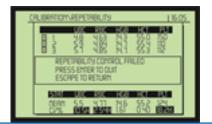
- The repeatability check is done by doing fresh blood CBC runs (from 3 to 11 maximum). Means and CV, for each parameter, are displayed into menu CALIBRATION\REPEATABILITY.
- Open «REPEATABILITY» menu.
- To run specimens and to select/unselect results (used for the statistic calculation), proceed as described into **«6.1.5. Autocalibration**».



- Press when analysis are completed.
- If CV results are lower than the defined limits, a message is displayed (as shown on the screen). When leaving the "REPEATABILITY" menu, results and statistics are erased.



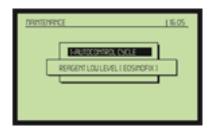
• If CV results are out of range, they are displayed in reverse video and a flag H is displayed next to it. CV limits are the one used for the Calibration and can be changed as described *Chapter 4. Instrument configuration Calibration*.



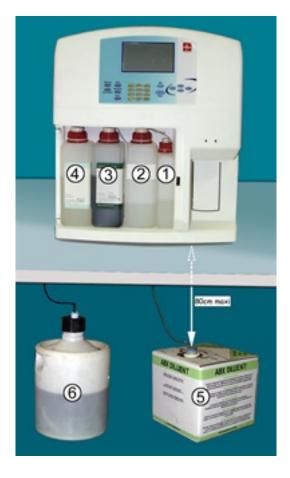
7. REAGENTS LEVEL/CHANGE

• The instrument calculates each reagent bottle capacity according to the number of cycles run. The instrument performs a reagent capacity check on each cycle. If a reagent low level is expected, an alarm is triggered off.

Example for the ABX EOSINOFIX: «REAGENT LOW LEVEL (EOSINOFIX)».



7.1. Reagents connections



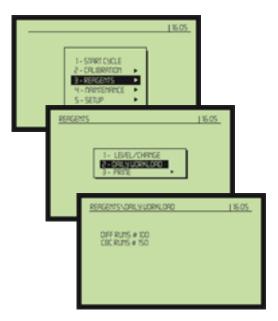
- 1 ABX LYSE
- 2 ABX BASOLYSE II
- 3 ABX EOSINOFIX
- 4 ABX CLEANER
- 5 ABX **DILUENT**
- 6 WASTE CONTAINER

CAUTION

The container must not be installed further than 80cm from the instrument. The diluent input tubing is cristal 3×6 (2 meters maximum), and the waste output tubing is cristal 4×6 (2 meters maximum).

7.2. Daily workload

- The operator can entered the approximated number of CBC and DIFF analyses performed each day.
- This «daily workload» warns the operator if a reagent low level is expected during the day. In this case, an alarm is triggered out: «REAGENT LOW LEVEL» at the end of the Startup cycle.
- The operator can replace the bottle (or container) immediately or performed the analyses until the specific reagent alarm is triggered (see **7.3. Reagent replacement**).

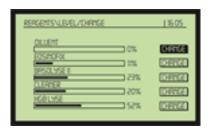


• Ranges are given in the below chart table:

Mode	DEFAULT VALUE	MIN.	Max.
DIF	40	1	500
CBC	10	1	500

7.3. Reagent replacement

- Open the reagent «LEVEL/CHANGE» menu.
- If a reagent level indicates «0%», this one has to be replaced.





Risk of erroneous results if one reagent is poured to another container. Never pour reagents from one container to another. Particles at the bottom of the old container can contaminate the new reagent and will cause unacceptable background results especially for Plts.

Properly dispose of the empty reagent bottle.

• Replace the bottle (or diluent container) as follows.

7.3.1. Bottle replacement

- · Open the reagent front door.
- Remove the empty bottle from the reagent compartment.
- Unscrew the «bottle stopper and reagent straw» assembly.
- Replace the bottle by a new one and screw the «stopper/straw» back on the new bottle.



Proceed as described in «7.3.3. Level update».

7.3.2. Diluent container replacement

- · Remove the diluent straw.
- Replace the container by a new one and install the straw deep in the new container.
- Proceed as described in «7.3.3. Level update».

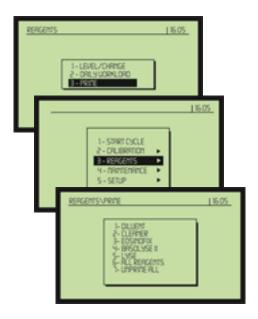
7.3.3. Level update

- Use the ____ and ___ to display the reagent «CHANGE» key in reverse video
- Press : a prime cycle is automatically run.
- The reagent level is updated to «100%».



7.4. Prime

• This function runs priming cycles useful at the instrument first installation or in case of a technician intervention.



CAUTION

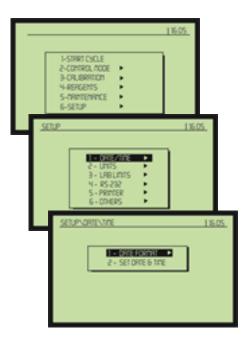
Remove the straws from the reagent bottles and containers before running a «7- Unprime all» cycle.

INSTRUMENT CONFIGURATION

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1. DATE AND TIME

• Date and time can be setup according to the country specifications:



1.1. Date format



- 3 different date formats can be used: DD.MM.YY MM.YY.DD YY.MM.DD
- Move the cursor in front of the required selection and press



• The new date format is recorded.

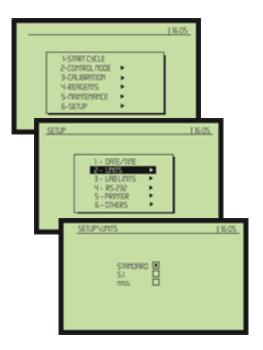
1.2. Change date



- Open the «SET DATE & TIME» menu.
- Type in the new date and (or) time.
- Press to confirm.

2. UNITS

• The operator has the choice between 3 different unit systems, move the cursor in front of the required unit system and press ____.



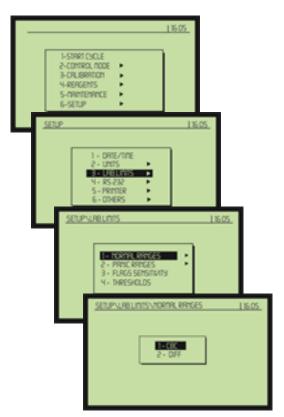
• Press to exit.

3. LABORATORY LIMITS

• Laboratory limits can be set by the operator according to its own specifications.

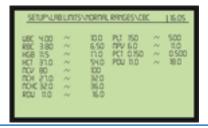
3.1. Normal ranges

- Results that exceed the «Normal ranges» limits are identified with a flag:
- «h» for results above the upper limit,
- «I» for results below the lower limit.
- CBC's and differential normal ranges are separated between the two following screens.



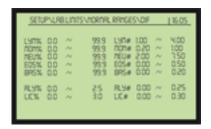
3.1.1. CBC's Normal ranges

- The CBC's normal ranges are factory adjusted to the following values. To modify them move the cursor to one of them and enter the new value.
- Step to the next one, etc... Press to validate.



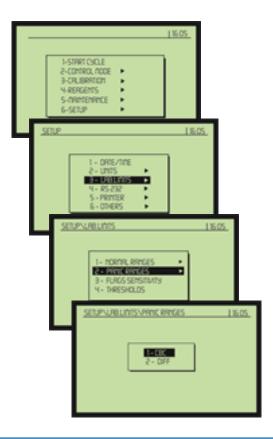
3.1.2. DIF's Normal ranges

- The DIFF normal ranges are factory adjusted to the following values. To modify them move the cursor to one of them and enter the new value.
- Step to the next one, etc... Press to validate.



3.2. Panic ranges

- Results that exceed the «*Panic ranges*» limits are identified with a flag: «H» for results above the upper limit,
- «L» for results below the lower limit.
- CBC's and differential panic ranges are separated between two screens. See «1.2.1. Normal ranges» to adjust them.

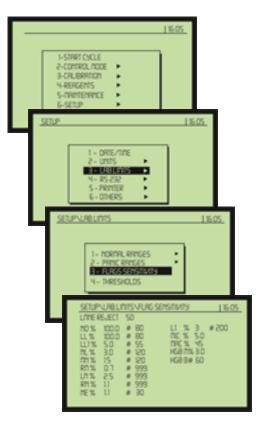


3.3. Flag Sensitivity

- Each flag is adjustable according to a percentage and (or) an absolute value. Beyond these values the corresponding flag is triggered off.
- The standard values are factory installed on the instrument and shown in the screen below.

Move the cursor to the value to modify and enter the new value (Password is required to enter this function).

• Press to validate.



• The following chart table gives the standards:

FLAG SENS	SITIVITY STA	NDARDS
FLAGS	%	#
No	100	120
LI	100	50
LI1	5	45
NI	3	120
Mn	100	120
Rm	1.1	999
Ln	2.5	999
Rn	1.1	999
Ne	1.1	60
L1	3	200
Mic	5	_
Mac	45	_
HGB M	3.0	_
HGB B	_	60



The meaning of each flag is described Chapter 3. Specimen Run & Results.

MHGB% indicates the reject level between the three HGB measures.

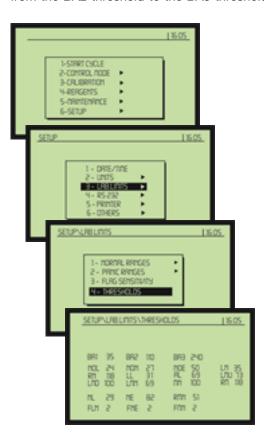
BHGB# allows to reject an HGB reference value that is faulty.

(see Chapter 3. Specimen Run & Results)

3.4. Thresholds

3.4.1. WBC/BASO

- All of the leukocytes are shown between the BA1 and BA3 thresholds.
 L1 absolute value is calculated between the channel 0 and the BA1 threshold (see Chapter 3. Specimen Run & Results).
- The percentage of basophils is calculated according to the number of particles from the BA2 threshold to the BA3 threshold.

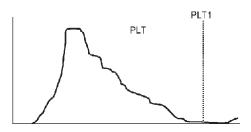


• These thresholds are factory adjusted to the following values:

THRESHO	OLD PURPOSE	CHANNEL
0	L1# counting area	0
BA1	Separation threshold between the L1# counting area and	the WBC 35
BA2	Separation threshold between the WBC and basophils	110
BA3	End of the basophil counting area	240

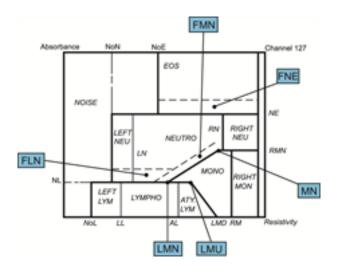
3.4.2. PLT

• The PL1 threshold is the number of the mobile channel that allows the calculation of the platelet population. It is automatically positionned.



3.4.3. LMNE matrix

- Each axis of the matrix (X and Y) is divided into 128 channels numbered from 0 to 127.
- 13 vertical indices (Y) and 13 horizontal indices (X) allow the user to locate these channels ten by ten. The first index of the matrix origin (at the bottom left) is the 0 channel, the fourth index of the matrix will be the channel 30 and so on.
- The threshold adjustment is expressed in channels.
- The threshold levels may be re-adjusted:
- 1 To improve the separation between different cell populations which may vary according to the anti-coagulant in use or instrument internal adjustment.
- 2 To modify the flag areas in one way or another to improve their detection sensitivity. In this case, the numeric adjustment of the concerned flag must also be readjusted too (see 3.3. Flag Sensitivity).
- 3 To modify one or several matrix areas in order to define more precisely a specific population for research purposes.



DC thresholds (resistive) vertically shown on the matrix are adjustable by the user:

THRE	THRESHOLD						
	Purpose	STANDARD	Low LIMIT	Нідн ціміт			
NoL	Separation between Noise and Left Lymphocytes	22	0	LL			
NoN	Separation between noise and Left Neutro	25	NoL	NoE			
LL	Separation between Left Lymphocytes and Lymphocytes	30	NoL	AL			
LN	Separation between Neutro and Left Neutro	35	NoN	LMN			
NoE	Separation between the noise and Eosino	48	NoN Channel	127			
LMN	Intersection dot between Lympho, Mono & Neutro thresholds	70	LN	LMU			
AL	Separation between the Lympho and the Atypical Lympho	68	LL	LMU			
LMU	Upper dot of the separation slope between Atypical Lympho & Mono	78	AL	LMD			
LMD	Lower dot of the separation slope between Atypical Lympho & Mono	90	LMU	RM			
MN	Upper dot of the separation slope between Mono & Neutro	90	LMN	RM			
RM	Separation between Monocytes and Right Monocytes	118	LMD Channel	127			
RN	Separation between Neutro and Right Neutrophils	118	MN Channel	127			

AC thresholds (Absorbance) horizontally shown on the matrix are adjustable by the user:

THRESHOLD					
	Purpose	STANDARD	Low LIMIT	H IGH LIMIT	
NL	Separation between Lymphocytes & Neutrophils	29	0	RMN	
RMN	Separation between Right Mono & Right Neutrophils	51	NL	NE	
NE	Separation between Neutrophils & Eosinophils	82	RMN Channel	127	

The **FLN**, **FNE**, **FMN** thresholds indicate the width (in channel number) of the **LN**, **NE**, **MN** alarm areas:

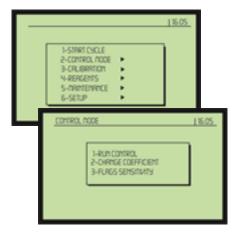
THRESHOLD	Purose	STANDARD
FLN	Channel number for the NL alarm area	2
FNE	Channel number for the NE alarm area	2
FMN	Channel number for the MN alarm area	2

• Move the cursor to the value to modify and enter the new value.

Press to validate.

4. CONTROL MODE

- Control mode allows to run only ABX DIFFTROL control blood.
- Before running specimens it is recommended that the operator runs a «Normal» control blood to verify that the system is within acceptable limits.
- Prepare a «Normal» control blood according to the specific instructions detailed in the control blood package insert (temperature, mixing, etc...).
- Make sure control blood thresholds and alarms parametering is correct and corresponds to lot target values you are going to use: options «CONTROL MODE\CHANGE COEFFICIENT» and «CONTROL MODE\FLAGS SENSITIVITY» (report to the following paragraph for further details about parametering a new lot).





Risk of erroneous results if the control blood is not continuously mixed between each analysis.

- From menu «CONTROL MODE» select option «RUN CONTROL».
- QC samples identification can be entered into «QC» window «Next ID» field:



· Open the vial and start sampling.



During control mode:

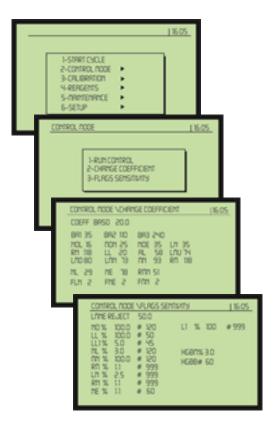
Results are printed with the title CONTROL.

Pathological limits, MIC & MAC alarms are disabled.

BASO curve is not printed.

- In order to use ABX **DIFFTROL** control blood, it is necessary to adjust matrix thresholds and coefficients, according to the values delivered with the control blood lot you are going to use.
- Parametering is done through menus «CONTROL MODE\CHANGE COEFFI-CIENT» and «CONTROL MODE\FLAGS SENSITIVITY». Using key to se-

lect and modify value, press key to validate.

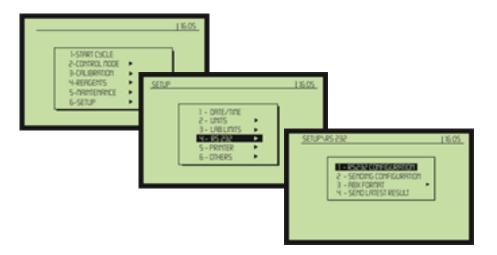


5. DATA OUTPUT

Several formats are available:

ARGOS: The **ARGOS** format allows the numerical result transmission only and the batch size is set to 406 characters for one result.

ABX: The **ABX** format allows the size of the transmitted data batches to be varied. Histograms, thresholds and matrix are available from the connection. **WORKS**: The **WORKS** format enables the user to received data on a spreadsheet program from the RS232 port.



• This function allows the user to set up the RS232.

Connection mode

Two modes are available on ABX PENTRA 60:

- An unidirectional mode that performs the data transmission towards the main laboratory computer.
- A bidirectional mode which is performed according three different steps:
- Communication initialization
- Results transmission
- End of communication.

Protocol

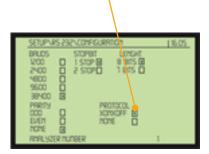
XON/XOFF protocol controls data flow between *ABX PENTRA 60* and main laboratory computer.



Any modification of the instrument's DATA OUTPUT setup has to be done in agreement with the technician in charge of the main computer system. (the password is required to access to the RS232 menu)

5.1. RS232 Configuration

- Choose the baud rate, the parity, the character length, the stop bit and the protocol as follows:
- Move the cursor to the parameter to be selected and press ___: the selection is shown by a dot inside the square.



Press to validate.

5.2. Sending configuration

• This function allows the user to configure the format and the mode.





The ABX format can be selected if the data transmission (length) is done on 8 bits.

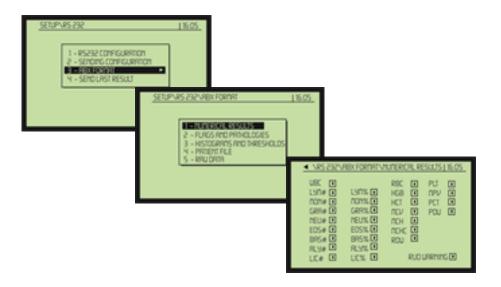
NOTE

5.3. ABX format

• A selection of transmitted parameters among numeric values, alarms and pathologies, curves and thresholds and patient files can be carried out (this selection only concerns **ABX format**).

5.3.1. Numerical values

- To select the hematologic parameters to be transmitted press _____. The «Numerical values» menu is opened.
- The dot inside the square displayed in front of the parameters indicates that these ones will be sent out.
- If some of them are not needed, delete the corresponding dot by means of



The «RUO» parameters are PCT, PDW, LIC and ALY. In «US mode» (setup by an approved HORIBA ABX technician at the instrument installation), the RUO parameters are automatically erased. In this mode, if the user has enabled these parameters from the menu «SETUP/OTHERS/IDENTIFICATION MODE», a warning message will be systematically printed out and sent to the host.

5.3.2. Flags and pathologies

• As for «5.3.1. Numerical values», select the alarms and the pathology messages to be sent out by means of the window «Flags and pathologies» pressing



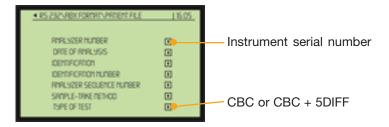
5.3.3. Histograms and thresholds

• As for «5.3.1. Numerical values», select the histograms and the thresholds to be sent out by means of the window "Histograms and Thresholds" pressing 3.



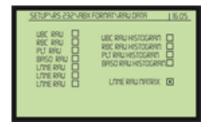
5.3.4. Patient file

• As for **«5.3.1. Numerical values**», select the patient file data to be sent out by means of the window **«Patient File»** pressing



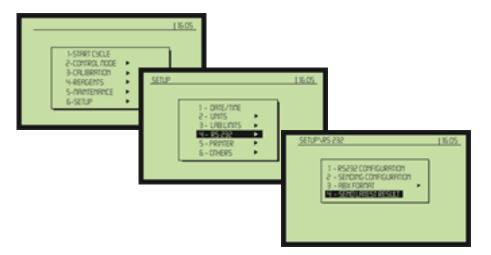
5.3.5. Raw values

• As for «5.3.1. Numerical values», select the Raw values to be sent out by means of the window «Raw values» pressing .



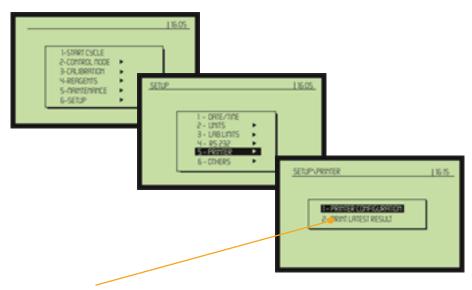
5.4. Send latest result

• Once the RS232 has been configured as described above, press ______ to send out the latest result to the main laboratory computer via the RS232 ouput.



6. PRINTER

6.1. Print latest result

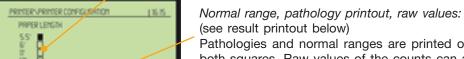


Press to print out the latest result configured as described below.

6.2. Printer configuration

Selection of the paper length:

- Move the cursor by means of and to the correct length.
- The selection is performed when a dot appears in the square pressing



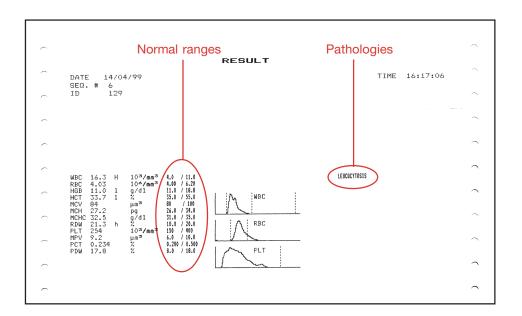
Pathologies and normal ranges are printed out when a dot appears in both squares. Raw values of the counts can also be printed out.

Zoomed printed screen:

If enabled the screen printed out by means of the key will be zoomed.

Disable printer:

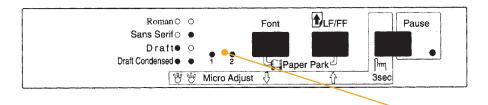
When selected, the results are not printed out and no print alarm is triggered.



CAUTION

Character selection for the use on the ABX PENTRA 60 (see printer user manual for details).

- The printer must be configured in Draft mode.



- Pressing the FONT key will change the states of both LEDs 1 and 2 (swiched off or lit).
- To configure the Draft mode press the FONT key until the LED 2 is lit and the LED 1 is switched off.

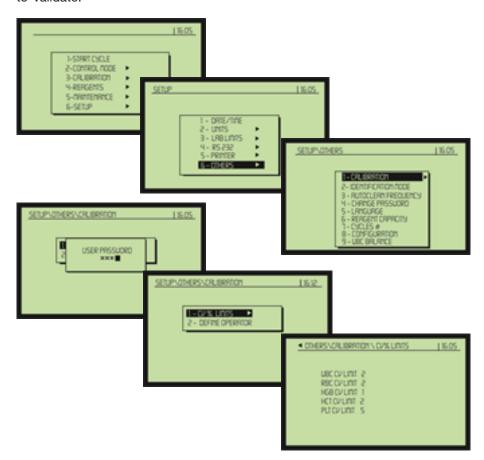
7. OTHERS

7.1. Calibration

7.1.1. CV% limits

- This menu gives the variation coefficients upper limits for each parameter used in the calculations of the variation coefficients.
- When calibration CV results are not within these ranges, a flag «H» is triggered next to the CV value (see Chapter 3. Specimen Run & Results Calibration).
- Move the cursor to the value to modify and enter the new value. Press to validate.



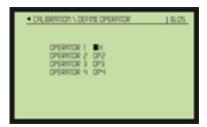


• The factory values are shown on the below chart table:

CV% Limits	Standard	min	max
WBC	2	1	3
RBC	2	1	3
HGB	1	1	2
HCT	2	1	3
PLT	5	3	7

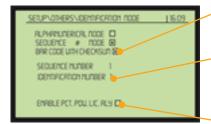
7.1.2. Define Operator

- An operator identification is associated to calibration operations (see *Chapter 3. Specimen Run & Results Calibration*). This one is modifiable from the menu *«Operator»*.
- 4 of them can be entered moving the cursor to the «OP1», «OP2», «OP3», «OP4» fields. Press to validate.
- The selection of the operator is performed directly in the Calibration menu.



7.2. Identification mode

• To select either the **alphanumerical mode** or the **Sequence # mode** (see *Chapter 3. Specimen Run & Results*), move to the required mode and press ____. The selection is performed when a dot appears in the square.



Barcode with checksum

Enables/disables the last character of the barcode (checksum).

Sequence # and identification # display

The sequence number indicates the number of analysis cycles from the beginning of the working day. This one is updated to 1 each new day.

Enable PDW, PCT, LIC, ALY

Enables/disables the RUO parameters (see 5. Data output\5.3. ABX format) for printing and sending towards the host.

7.3. Autoclean frequency

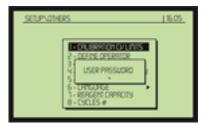
• Adjust the Autoclean frequency according to the number of analyses carried out (factory adjusted to 75 analysis cycles):

Minimum value: 1 Maximum value: 75



7.4. Change password

- The password is used to access the following functions:
- CALIBRATION / CHANGE COEFFICIENTS
- SETUP / LAB LIMITS / FLAG SENSITIVITY
- SETUP / LAB LIMITS / THRESHOLDS
- SETUP / RS 232
- SETUP / OTHERS / CHANGE PASSWORD
- SETUP / OTHERS / CALIBRATION CV% LIMITS
- FORCED CALIBRATION
- The original password is «123». To change it enter the previous password on this screen and press .



Type in the new password on this screen and press



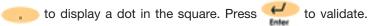


7.5. Change language

• The 6 following languages are available on the instrument:



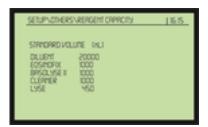
• To modify the language, move the cursor to the wished language and press





7.6. Reagent capacities

• This function indicates the initial volumes of each reagent bottle or container in order to calculate the consumption and the left reagent in each bottle.



• Ranges are given in the below chart table:

REAGENT	STANDARD	Min	Max
	CAPACITY		
DILUENT	20 000	1 000	30 000
CLEANER	1 000	100	5 000
EOSINOFIX	1 000	100	5 000
BASOLYSE 2	1 000	100	5 000
LYSE	400	100	2 000

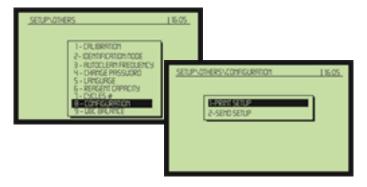
7.7. Cycle counters

• Shows the total number of analysis cycles (CBC & DIF mode) run on the instrument, as well as Startup, Shutdown and Autocontrol cycles.



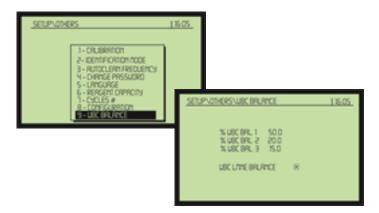
7.8. Configuration

• Prints or sends (to the host) the setup of the instrument (coefficients, thresholds and flags values, internal parameters etc...).



7.9. WBC Balance

- The meaning of these flags is described *Chapter 3. Specimen Run & Results WBC Balance*.
- This window allows the user to enable or disable the WBC balance control (a dot in the square will enable the WBC balance).
- The triggering off thresholds of the balance flags are default values. They can not be modified by the user.



MAINTENANCE & TROUBLESHOOTING

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1. MAINTENANCE

• One of the principle factors contributing to accurate and reliable results is a well-maintained instrument.

Several maintenance functions are available for the user to clean and check the instrument. On the chart table below, the maintenance cycle frequencies are indicated.

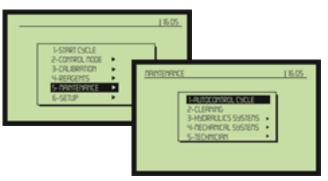
Cycles	<100 ANALYSES PER DAY	>100 ANALYSES PER DAY
Shut down	1 per day	1 per day
Autoconcentrated cle	aning 1 per month	2 per month

1.1. Autocontrol cycle

• This cycle is required after an emergency stop of the instrument or when a faulty operation has been detected.

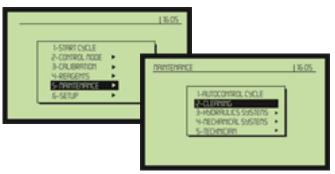
A series of mechanical, hydraulic and electronic networks control is performed:

- General rinse.
- Control of the correct drains of the chambers.
- Initialization of the mechanical assemblies.



1.2. Cleaning cycle

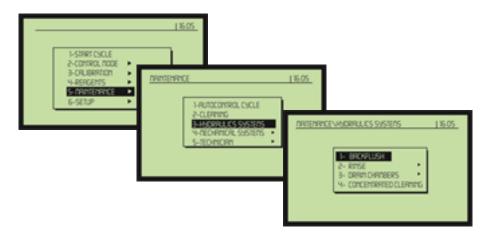
- This cycle performs a chamber rinsing (as the "Rinse / Chambers" cycle) and it also primes reagent that could remained into the heating coil.
- After one hour off, the system automatically asks the user to run this cycle.
- User can run this cycle (after a stop shorter than an hour) by means of the beside menu.



1.3. Hydraulics systems

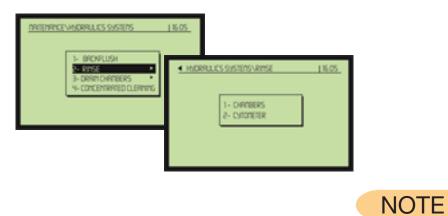
1.3.1. Backflush

• Delivers pressure through the apertures of the counting chambers to clean them in case of blockages.



1.3.2. Rinse

• ABX **Diluent** is sent to either chambers (pressing 1) or cytometer (pressing 2) to rinse out these parts separately.



The cytometer rinse includes a sequence that removes bubbles that could remain inside the flowcell.

1.3.3. Drain chambers

Runs chamber draining cycle for the following parts:

Rinse

Sampling probe rinsing chamber (1) drain

• First dilution

First dilution chamber (2) drain

• LMNE

LMNE chamber (3) drain

• RBC/PLT

RBC/PLT chamber (4) drain

• WBC/BASO

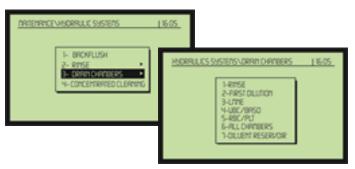
WBC/BASO chamber (5) drain

• All chambers

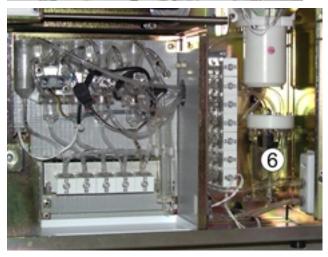
General drain

• Diluent reservoir

Diluent reservoir (6) drain







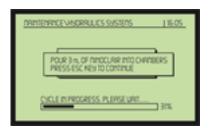
1.3.4. Concentrated cleaning

· Cleans the chambers with bleach.



Procedure:

- Press : a rinse cycle is run.
 Wait for the following message to be displayed.



• Open the instrument pneumatic door.



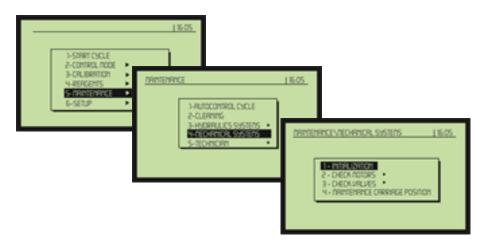


- Using 5ml syringe, pour 3ml of MINOCLAIR (or bleach diluted to 4° chloride) into each chamber and press
- Close the instrument door and wait for the instrument to complete the cleaning procedure (Concentrated cleaning duration around 5 mn).

1.4. Mechanical systems

1.4.1. Initialization

• All the mechanical assemblies (sampling probe, carriages, syringes...) return to their initial positions, i.e. the operating analysis positions.



1.4.2. Check motors

To control the correct operation of each motor:

- Switch off the instrument.
- Open the door (see on previous page) and the left cover of the instrument:

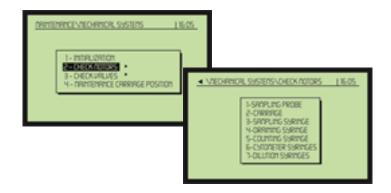




CAUTION

Be careful to the flat cables while opening the door!

- Loosen the 2 screws of the board support panel and open it.
- Once both sides of the instrument are open, switch on the instrument. Enter the check motors menu and control each motor pressing the corresponding number.

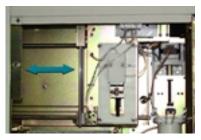


Right side of the instrument

1. Sampling needle: Check the needle up and down operations. The movements should be smooth and regular.



2. Carriage: Check the right and left movements of the carriage.



3. Sampling syringe: Check that the syringe up and down movements are smooth and regular.

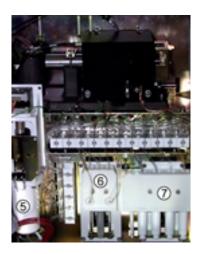




4. Draining syringe: Check the correct up and down movements of the syringe.

Left side of the instrument

5. Counting syringe: Same operation check.6. Cytometer syringes: Same operation check.7. Dilution syringes: Same operation check.

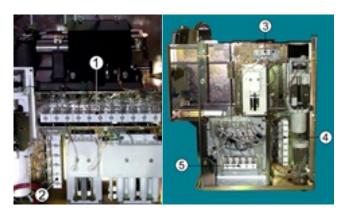


1.4.3. Check valves

To control the correct operation of the valves:

- Open the door (see on previous pages) and the left cover of the instrument.
- The valves can be operated pressing the corresponding number of the assembly.
- Closely observe the valve operations; the movements have to be straight and regular.





1.4.4. Maintenance carriage position

• The probe goes up, the carriage comes under chambers and all stepper motors are freed for the user to do any maintenance.



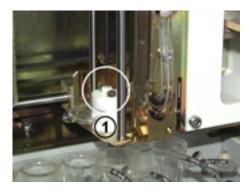
To bring the probe back, press key, once more.

1.5. Technician

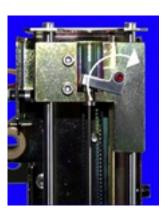
• Reserved to HORIBA ABX Field Service Engineer.

1.6. Sampling probe replacement

- Switch off the instrument and remove the power cable.
- Open the pneumatic access door (Right side of the instrument).
- Unscrew both fixation screws of the probe rinsing block on the carriage:



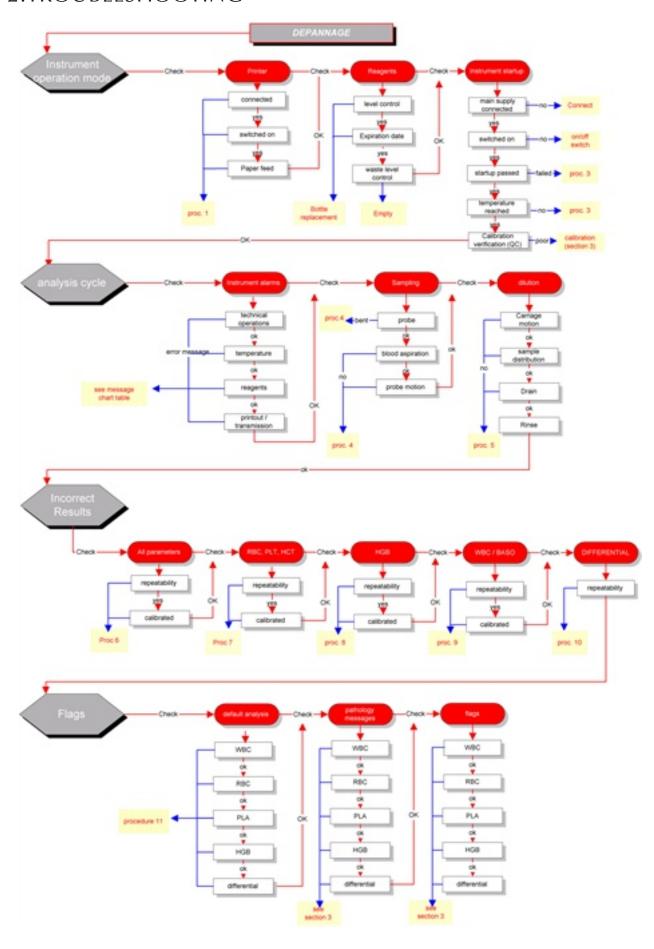
• Take out the probe and the rinsing block at the same time (lift the probe locker to free the probe). Replace the probe.





- Reassemble following previous steps backward.
- When startup is done check for that there is no leak.

2.TROUBLESHOOTING



2.1. Instrument operation mode

Procedure 1: Printer

• See Printer user manual to connect, to switch on/off or to feed paper.

Procedure 2: Reagents

- Bottle replacement (See Chapter 3. Specimen Run & Results).
- Waste container: empty and neutralize as recommended in section 1. Specifications.

Procedure 3: Instrument startup

Startup failed:

- · Check the reagent expiration dates: replace bottle if necessary.
- Re-run a startup.
- Perform an auto-concentrated cleaning (see 1.3.4. Concentrated cleaning).

Temperature not reached:

- Wait for 5 minutes to reach the operating temperature.
- Call your HORIBA ABX representative Service Department.

Calibration verification out of the acceptable limits:

- Clean the system (see 1.3.4. Concentrated cleaning) and rerun the control.
- Run a new vial.
- Calibrate the instrument (See Chapter 3. Specimen Run & Results).

2.2. Analysis cycle

Error messages *Printer*

DISPLAYED MESSAGE	CAUSES	User actions	
The printer is disconne	cted,	Printout operations disabled	- Switch on or
switched off or has not	been selected		- Press «ON LINE» or
			- See the printer's user's manual.
Defect on printer, make	sure	Printout operations disabled	- Feed paper or
there is paper			- See the printer's user's manual.
Printer being used, acti	on impossible	The printer operates yet	Wait for the current printout to
			complete and restart the request.

Transmission

DISPLAYED MESSAGE	CAUSES	User actions	
No ENQ character receive	d on RS232		
No ACK character receive	d on RS232		
Internal error on RS232			Check the RS232 configuration
Write error RS232	I	Defect on	Menu «SETUP / RS 232/
Timeout overflow on RS2	32	transmission	RS232 CONFIGURATION».
CRC error	(operations.	Call HORIBA ABX representative
Instrument number error			service department.
Message lenght error			
Receiving data error			

Calibration

DISPLAYED MESSAGE CAUSES	U SER ACTIONS	
Access denied	Incorrect pasword entered	Re-type the password.
	by the operator	
Data not saved, value out of range	Incoherent value entered	Re-type in the item.
	by the operator	
Illegal date	Incoherent date entered	Re-type in the date.
	by the operator	
Minimum tagged CBC incorrect,	Selected results for calibration	Select at least 3 results.
at least 3	calculation < 3	
Max num. done, start cycle refused	11 results are already recorded	Perform the procedure
	in the calibration table	described section 3 to
		change coefficients or to
		exit the calibration menu.

Miscellaneous

DISPLAYED MESSAGE CAUSES	User actions	
Emergency stop, Run an autocontrol	Blocked motor	
	Incorrect Drains	Control the motor operations:
	Thermal door opened	Menu «MAINTENANCE /
		MECHANICAL SYSTEMS /
not reaching home	Blocked motor	CHECK MOTORS».
Thermal door opened	Open during a cycle	Close the door and rerun the cycle.
Illegal time	Incoherent time entered	Enter the correct time.
	by the operator	
Data not saved, value out of range	Incorrect value entered	Enter a correct value.
	by the operator	
User password	Password required to	Enter the password.
	carry out an operation	
Enter an identification	To run an analysis in	Enter the identification as described
	alphanumerical mode,	section 3 of this manual.
	the identification is mandate	ory

Reagents

DISPLAYED MESSAGE CAUSES	User actions	
No diluent, check level	Diluent reservoir empty	Replace the diluent container
		(menu «REAGENTS / LEVEL-CHANGE»).
Reagent low level (reagent name)	None	Replace the bottle (menu «REAGENTS /
		LEVEL-CHANGE»).
Reagent low level	Message triggered at	Control the reagent levels or/and replace it.
	the end of the Startup	
Drain sensor time out	Chamber and/or syringe	Call HORIBA ABX representative Service
	draining problems	Department.
Transfer sensor time out	Transfer problem with	Call HORIBA ABX representative Service
	LMNE matrix sample	Department.

Temperature

DISPLAYED MESSAGE	Causes	User actions	
Temperature out of range		Thermic regulation problem	Call HORIBA ABX representative department.

Procedure 4: Sampling

Sample probe:

- Check the motion of the probe (menu *maintenance/mechanical systems/check motors/sample probe*).
- Open the pneumatic access door.
- Run an analysis cycle on blood.
- Control the specimen aspiration (blood delivered in the chambers).
- Check the probe is not bent.



Procedure 5: Dilution

Carriage motion:

• Check that hydraulic operations appear to work properly (reagent level in each chamber, carriage motion).

Sample distribution:

• Run an analysis cycle and check that the specimen distribution is performed correctly into the chambers.

A probe rinse is previously carried out in the rinse chamber (1) (blood appears in this chamber).

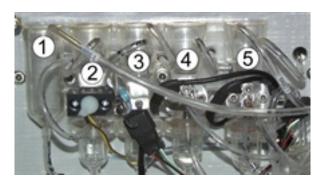
The first specimen is delivered to the first dilution chamber (2) (brown colour), the second to the WBC/BASO chamber (5) (clearer)

and the third one to the LMNE chamber (3) (the darkest). Check that bubbling is provided to these chambers once the specimen have been diluted.

Drain and rinse:

· Check the chambers are drained and rinsed.

If operations are faulty, identify the source of the malfunction and call your *HORIBA ABX* representative Service Department.



2.3. Results

Procedure 6: All parameters

Repeatability (according to the CV Specifications see section 1):

- Is the instrument non repeatable on all parameters? If not perform directly the procedure corresponding to the non repeatable parameter.
- If all parameters are not repeatable:
- Visually check that the sampling operation appears to be correct.
- Control the sampling syringe operations (see 1.3. Mechanical systems).
- Control the counting syringe operations (see 1.3. Mechanical systems).
- · Perform an autoconcentrated cleaning.
- If all these operations appear to be correct, call your *HORIBA ABX* Representative Service Department.

Calibration:

• If the system appears to be operating properly, fresh uncontaminated reagents are being used and the precision is within the specifications, the *ABX PENTRA 60* may need a calibration as described *Chapter 3. Specimen Run & Results*.

Procedure 7: RBC, PLT, HCT

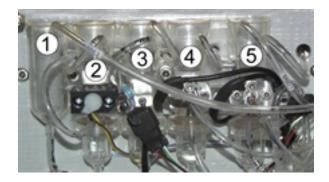
Repeatability:

If RBC, PLT & HCT are not repeatable:

- Check the second dilution is carried out correctly (sample from the chamber 2 to the chamber 4).
- Check the Bubbling in the RBC/PLT chamber (4) once the dilution is carried out (the dilution remains transparent).
- Perform an autoconcentrated cleaning.
- If all these operations appear to be correct, call your *HORIBA ABX* Representative Service Department.

Calibration:

• See procedure 6.



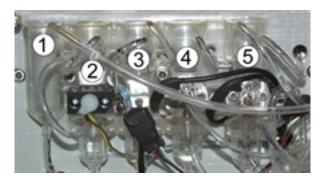
Procedure 8: HGB

Repeatability:

- Is the instrument non repeatable on HGB?
- Run a analysis cycle.
- Check the dilution colour in the chamber (2).
- «Milky» when the sample is first delivered to the chamber, then brown transparent when Lyse is injected.
- Perform an autoconcentrated cleaning.
- If this does not correct the HGB count, call your *HORIBA ABX* Representative Service Department.

Calibration:

• See procedure 6.



Procedure 9: WBC/BASO

Repeatability:

- Is the instrument non repeatable on WBC/BASO?
- Perform an autoconcentrated cleaning.
- If this does not correct the WBC/BASO count, call your *HORIBA ABX* Representative Service Department.

Calibration:

• See procedure 6.

Procedure 10: Differential

Repeatability:

- Is the instrument non repeatable on differential?
- Perform an autoconcentrated cleaning.
- If this does not correct the WBC/BASO count, call your *HORIBA ABX* Representative Service Department.

2.4. Flags

Procedure 11: Default analysis

WBC:

- · Perform an autoconcentrated cleaning.
- Re-run the specimen.
- Check the operation of the liquid valve <23> and <14> (opening and closing during the cycle). If defective, replace the valve.
- If it does not correct the WBC results, call your *HORIBA ABX* representative Service Department.

RBC, PLT:

- · Perform an autoconcentrated cleaning.
- Re-run the specimen.
- Observe the operation of the liquid valve <14> (opening and closing during the cycle). If not replace the valve.
- If it does not correct the RBC or PLT results, call your *HORIBA ABX* representative Service Department.

HGR.

- Is the HGB LED illuminated when the system power is on? If not call your HORIBA ABX representative Service Department. If it is continue.
- · Perform an autoconcentrated cleaning.
- Re-run the specimen.
- If it does not correct the HGB results, call your HORIBA ABX representative Service Department.



Differential:

- Control that the lamp is still illuminated when the instrument is on. If not replace it as described below.
- Run a cytometer rinse (menu *maintenance/hydraulics systems/rinse/cytometer*).
- Re-run the specimen.
- If it does not correct the LMNE results, call your *HORIBA ABX* representative Service Department.

Lamp replacement:

- Switch off the instrument.
- Open the cover.
- Disconnect the lamp supply.
- · Unscrew lamp fixation screws (few turns).



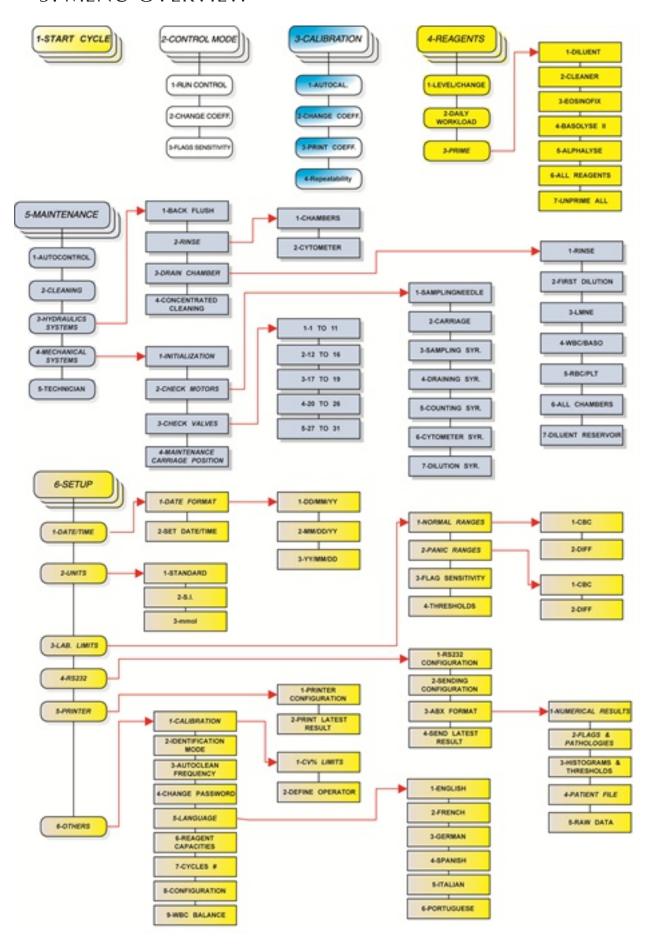
WARNING

Wait for the lamp to cool down before handling it!

- Turn the lamp and remove it.
- Replace the lamp by a new one.
- Put back the fixation system and block the screws.
- · Reconnect the lamp supply.



3. MENU OVERVIEW



ANNEX

GLOSSARY	1-2
LIST OF ABBREVIATIONS	1-4
PNEUMATIC DIAGRAM	1-6

GLOSSARY

DEFINITION	
accuracy	Ability of the instrument to agree with a predetermined reference value
	at any point within the operating range; closeness of a result to the true
	(accepted) value
agglutination	Clump
background count	Measure of the amount of electrical or particle interference
blank cycle	Runs diluent through the system to clean it out
calibration	A procedure to standardize the instrument by determining its deviation
	from calibration references and applying any necessary correction
	factors
calibration factors	These are correction factors that the system uses to fine-tune
	instrument accuracy
calibrator	A substance traceable to a reference method for preparation or material
	used to calibrate, graduate, or adjust measurement
carryover	The amount, in percent, of blood cells remaining in diluent following the
	cycling of a blood sample
cell control	A preparation made of human blood with stabilized cells and surrogate
	material used for daily instrument quality control
characteristics	See performance characteristics
coefficient of	An expression in percent of data (SD) spread related to the mean
variation	CV%=(SD/mean)x100
control	A substance used for monitoring the performance of an analitycal
	process or instrument
CV	See Coefficient of variation
default	An original factory setting
expiration date	The last day that you can use that specific lot number of reagent,
	control or calibrator
fL	Abbreviation for femtoliter
femtoliter	One quadrillionth (10 ¹⁵) of a liter
field	An area on a screen for entering data
flags	On printouts or screens, letters or symbols that appear next to parameter
	results to indicate specific conditions
linearity	The ability of an instrument to recover expected results (reference
	values or calculated values) for such parameters as WBC, RBC, Hgb
	and Plt, at varying levels of concentration of these parameters within
	specified limits
lot number	A manufacturer's code that identifies products such as reagents,
	controls or calibrators

mean	Arithmetic average of a group of data
operating range	Range of results over which the instrument displays, prints and
	transmits data
parameter	A component of blood that the instrument measures and reports
performance	Actual performance of the instrument
characteristics	
performance	Targeted performance of the instrument based on established ranges
	and parameters specifications
quality control (QC)	A comprehensive set of procedures a laboratory establishes to ensure
	that the instrument is working accurately and precisely
reproducibilty	This procedure checks that the system gives similar results (within
	established limits) every time it measures the same sample
SD	A measure of variation within a group samples or within a population
	(standard deviation)
shutdown cycle	Cleans the instrument's fluidic lines and apertures to help prevent
	residue buildup
specifications	See performance specifications
startup cycle	Ensures that the instrument is ready to run; includes performing a
	background test
verification	Procedure to analyze cell controls or whole blood with known values
	to determine if your results are within the acceptable range
whole blood	Non-diluted blood; blood and anticoagulant only

LIST OF ABBREVIATIONS

ABBREVITAION	Meaning
μL	microliter
μm	micrometer
ACD	acid-citrate-dextrose
ALY	Atypical Lymphocyte
BAS or BASO	basophil
bps	bit per second
CBC	cell blood count
Cl	chlorine
cm	centimeter
CV	coefficient of variation
DHSS	double hydrodynamic sleeving
diff	differential
dL	deciliter
EDTA	ethylenediaminetetraacetic acid
EOS	eosinophil
fL	femtoliter
ft	foot or feet
g	gram
Gb	gigabyte
Hct	hematocrit
Hgb	hemoglobin
Hz	hertz
L	liter
lb	pound
LED	light-emitting diode
LIC	Large Immature Cell
LYM	lymphocyte
m	meter
mb	millibar
Mb	megabyte
MCH	mean corpuscular hemoglobin
MCHC	mean corpuscular hemoglobin concentration
MCV	mean corpuscular volume
MDSS	multi distribution sampling system
MHz	megahertz
mL	milliliter
mm	millimeter

MON	monocyte
MPV	mean platelet volume
MSDS	material safety data sheet
n	number
NEU	neutrophil
nm	nanometer
Pct	Plateletcrit
PDW	Platelet Distribution Width
PIt	platelet
RBC	red blood cell
RDW	red distribution width
SD	standard deviation
VA	voltampere
Vac	volt alternatif current
WBC	white blood cell

