



Laboratory Name:	
Laboratory Address:	
Date of this packet:	
Insert Revision:	26196en Rev. C 2017/06

Alere Cholestech LDX® System (Waived) Laboratory Procedure

This procedure is intended to provide a ready outline reference for performance of the assay. These abbreviated directions for use are not intended to replace the complete package insert. **Any modifications to this document are the sole responsibility of the Facility.**

LIPID PROFILE•GLU
Total Cholesterol, HDL Cholesterol,
Triglycerides and Glucose Panel Test Cassette
(REF 10-991)

LIPID PROFILE
Total Cholesterol, HDL Cholesterol and Triglycerides
Panel Test Cassette
(REF 10-989)

TC•HDL•GLU
Total Cholesterol, HDL Cholesterol and Glucose
Panel Test Cassette
(REF 10-990)

TC•HDL
Total Cholesterol and HDL Panel Test Cassette
(REF 10-987)

TC•GLU
Total Cholesterol and Glucose Panel Test
Cassette
(REF 10-988)

TC
Total Cholesterol Test Cassette
(REF 10-986)

CLIA WAIVED - This test is waived under CLIA'88 regulations. Each laboratory or testing site using this test system must have a CLIA Certificate of Waiver. To obtain a Certificate of Waiver, refer to CMS website (<http://www.cms.hhs.gov/CLIA/>). Laboratories must follow the manufacturer's instructions. If a laboratory modifies the test system instructions, then the test is considered high complexity and subject to all CLIA requirements.

1. Intended Use

The Alere Cholestech LDX® System is a small, portable analyzer and test cassette system. The System is for *in vitro* diagnostic use only. The Lipid Profile•GLU Cassette is for the quantitative determination of total cholesterol, HDL (high-density lipoprotein) cholesterol, triglycerides and glucose in whole blood. A TC/HDL (total cholesterol/HDL cholesterol) ratio and estimated values for LDL (low-density lipoprotein) and non-HDL cholesterol are calculated by the Alere Cholestech LDX® Analyzer.

- Cholesterol measurements are used in the diagnosis and treatment of disorders involving excess cholesterol in the blood and lipid and lipoprotein metabolism disorders.
- HDL (lipoprotein) measurements are used in the diagnosis and treatment of lipid disorders (such as diabetes mellitus), atherosclerosis, and various liver and renal diseases.
- Triglyceride measurements are used in the diagnosis and treatment of patients with diabetes mellitus, nephrosis, liver obstruction, other diseases involving lipid metabolism, or various endocrine disorders.



- Glucose measurements are used in the diagnosis and treatment of carbohydrate metabolism disorders including diabetes mellitus, neonatal hypoglycemia*, and idiopathic hypoglycemia, and of pancreatic islet cell carcinoma.

*Performance of the Alere Cholestech LDX[®] System has not been tested on samples from newborns.

2. Summary

Cholesterol is a major cause of atherosclerotic cardiovascular disease (ASCVD) and large clinical trials show that lipid-lowering therapy substantially reduces risk for ASCVD.¹ Recent clinical practice guidelines for cholesterol management from the American College of Cardiology and the American Heart Association recommend a fasting lipid profile consisting of total cholesterol (TC), HDL cholesterol (HDL), LDL cholesterol (LDL), and triglycerides (TRG). In nonfasting individuals, non-HDL levels can identify patients for further evaluation. The National Cholesterol Education Program recommends that for routine patient evaluation and follow-up, LDL should be estimated from measurement of TC, HDL, and TRG using the Friedewald formula.² LDL is used to identify certain patient populations as candidates for lipid-lowering therapy. TC and HDL are employed in algorithms to identify ASCVD risk.³ LDL and TRG are used to identify secondary causes of hyperlipidemia, and TRG facilitates selection of certain lipid-lowering agents. Follow-up measurement of these lipid parameters is necessary to ensure that individuals achieve appropriate therapeutic response and are adherent to treatment recommendations.¹

Glucose is the major energy source for the human body and is necessary for the growth, development and maintenance of virtually all cells in the tissues and organs.⁴ Blood glucose levels are maintained within a relatively narrow range by a combination of interacting factors that decrease the glucose level when it gets too high and increase it when it drops too low. Because this delicate homeostatic mechanism is able to keep glucose levels within such a narrow range, values outside this range generally indicate a disease state. Insulin is the principal hormone regulating glucose levels, and any defect in the production or action of insulin can lead to one of the several forms of diabetes mellitus. Persons with diabetes mellitus may develop a number of serious complications, and some studies have shown that careful control of blood glucose levels may reduce the incidence or delay the onset of these complications.

Total cholesterol, HDL cholesterol, triglycerides and glucose can be measured simultaneously from a single drop of blood using the Alere Cholestech LDX[®] System's rapid, accurate technology. Estimated LDL cholesterol and non-HDL cholesterol and a TC/HDL ratio are calculated using the measured values with software version V3.0 and higher.

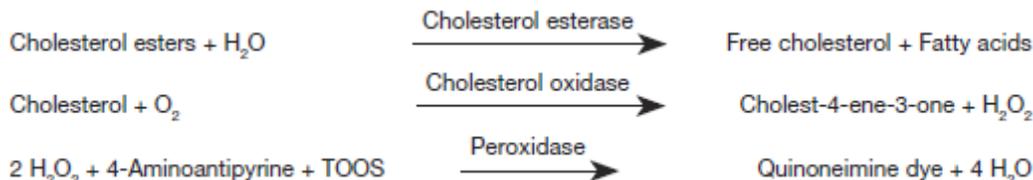
3. Test Principle

The Alere Cholestech LDX[®] System combines enzymatic methodology⁵ and solid-phase technology to measure total cholesterol, HDL cholesterol, triglycerides and glucose. Samples used for testing can be whole blood from a fingerstick (collected in a lithium heparin-coated capillary tube) or venipuncture. The sample is applied to an Alere Cholestech LDX[®] cassette.

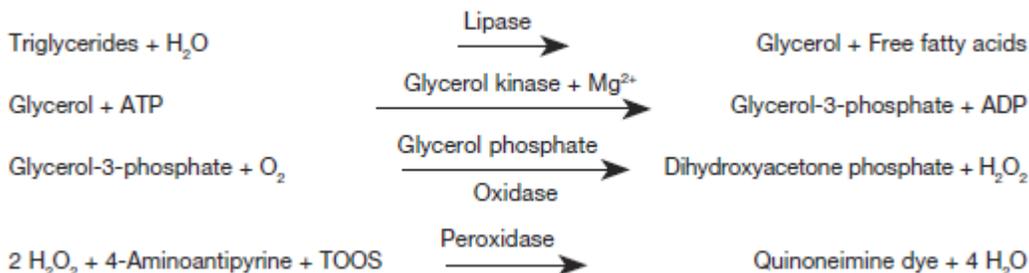
The cassette is then placed into the Alere Cholestech LDX[®] Analyzer where a unique system on the cassette separates the plasma from the blood cells. A portion of the plasma flows to the right side of the cassette and is transferred to both the total cholesterol and triglyceride reaction pads. Simultaneously, plasma flows to the left side of the cassette where the low- and very low-density lipoproteins (LDL and VLDL) are precipitated with dextran sulfate (50,000 MW) and magnesium acetate precipitating reagent.⁶ The filtrate, containing both glucose and HDL cholesterol, is transferred to both the glucose and HDL cholesterol reaction pads. The Alere Cholestech LDX[®] Analyzer measures total cholesterol and HDL cholesterol by an enzymatic method based on the method formulation of Allain et al,⁷ and Roeschlau.⁸ Cholesterol esterase hydrolyzes the cholesterol esters in the filtrate or plasma to free cholesterol and the corresponding fatty acid. Cholesterol oxidase, in the presence of oxygen, oxidizes free cholesterol to cholest-4-ene-3-one and hydrogen



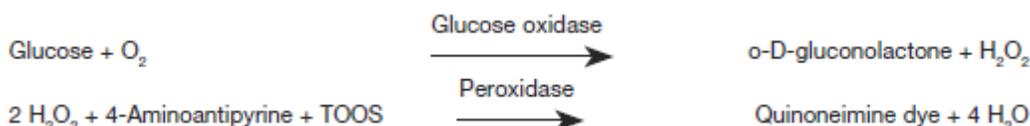
peroxide. In a reaction catalyzed by horseradish peroxidase, the peroxide reacts with 4-aminoantipyrine and N-ethyl-N-sulfohydroxypropyl-m-toluidine, sodium salt (TOOS) to form a purple-colored quinoneimine dye proportional to the total cholesterol and HDL cholesterol concentrations of the sample.



The Alere Cholestech LDX® Analyzer measures triglycerides by an enzymatic method based on the hydrolysis of triglycerides by lipase to glycerol and free fatty acids. Glycerol, in a reaction catalyzed by glycerol kinase, is converted to glycerol-3-phosphate. In a third reaction, glycerol-3-phosphate is oxidized by glycerol phosphate oxidase to dihydroxyacetone phosphate and hydrogen peroxide.⁹ The color reaction utilizing horseradish peroxidase is the same as for the total cholesterol and HDL cholesterol.



The Alere Cholestech LDX® Analyzer measures glucose by an enzymatic method that uses glucose oxidase to catalyze the oxidation of glucose to gluconolactone and hydrogen peroxide. The color reaction utilizing horseradish peroxidase is the same as that for total cholesterol, HDL cholesterol and triglycerides. The resultant color in all the reactions is measured by reflectance photometry.



A brown (magnetic) stripe on each cassette contains the calibration information required for the Alere Cholestech LDX® Analyzer to convert the reflectance reading (% R) to the total cholesterol, HDL cholesterol, triglycerides and glucose concentrations.

4. Specimen Collection/Treatment

The Alere Cholestech LDX® System is CLIA waived for fingerstick or venous whole blood unprocessed samples only.

A. Specimen:	<p>Sample Type:</p> <ul style="list-style-type: none"> • Fingerstick whole blood • Venous whole blood <p>Sample Requirement</p> <ul style="list-style-type: none"> • Sample Volume: 40 µL of whole blood
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B. Specimen Collection:	<p>Fingerstick whole blood:</p> <ul style="list-style-type: none"> When testing triglycerides the subject should fast for 9-12 hours before the sample is collected. Subjects should fast for at least 8 hours for glucose tests before the sample is collected. Collect the sample from a fingerstick into a Alere Cholestech LDX® 40 µL Capillary Tube. (See the Fingerstick Procedure below). Place the blood into the cassette within 8 minutes after collection. Blood from the fingerstick should flow freely. Too much squeezing of the finger may cause inaccurate results. <p>Venous whole blood:</p> <ul style="list-style-type: none"> Collect blood into a green-top tube (heparin anticoagulant). <p>NOTE: Do not use a tube with any other additives because it may cause inaccurate results.</p> <ul style="list-style-type: none"> Use a pipette and tip to place blood into the cassette. Whole blood should be used within 30 minutes. Samples should be at room temperature for testing. Mix all samples by gently inverting at least 7 times before testing. Glucose levels decrease 5 to 10 mg/dL (0.28 to 0.55 mmol/L) per hour in whole blood at room temperature.
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5. Reagents and Equipment

A. Materials Provided

Alere Cholestech LDX® Lipid Profile•GLU, Lipid Profile, TC•HDL•GLU, TC•HDL, TC•GLU, or TC Cassettes

Component	Content	Quantity				
Test Cassettes	Each cassette contains a minimum of:	10				
			TC HDL TRG GLU			
	Dextran sulfate (50,000 M.W.), µg		-	17.2	-	-
	Magnesium acetate, µg		-	153	-	-
	Cholesterol esterase, U (Pseudomonas species)		0.287	0.287	-	-
	Lipase, U (Bacterial source)		-	-	53.9	-
	Cholesterol oxidase, U (Pseudomonas species)		0.049	0.049	-	-
	Peroxidase (horseradish), U		0.266	0.266	0.133	0.133
	4-Aminoantipyrine, µg		5.39	2.52	2.73	5.11
	N-Ethyl-N-sulfohydroxypropyl m-toluidine, sodium salt, µg		77.0	16.2	16.1	32.3
	Glycerol kinase, U (Cellulomonas species)		-	-	0.399	-
	Glucose oxidase, U (Cellulomonas species)		-	-	-	0.539
	Adenosine triphosphate, µg (Bacterial source)		-	-	18.8	-
	Glycerol phosphate oxidase, U (Aerococcus viridans)		-	-	0.238	-
	Magnesium chloride, µg		-	-	1.37	-
			Nonreactive ingredients: buffers and stabilizers			
Package insert		1				



B. Materials Required But Not Provided

- Alere Cholestech LDX[®] System
- Alcohol swabs and gauze for cleaning puncture site
- Lancets for capillary blood collection
- Alere Cholestech LDX[®] 40 μ L Lithium Heparin Capillary Tubes
- Alere Cholestech LDX[®] Capillary Plungers
- Gloves
- Biohazard waste containers
- Quality control material
- MiniPet[®] Pipette and tips or micropipetter that will deliver 40 μ L for use with venipuncture samples and quality control material
- Vacuum collection tubes, needles, tube holders and sample tubes if the sample is to be collected by venipuncture

6. Storage and Stability

Cassette Storage and Stability

Cassettes **must** be stored in the sealed foil pouches.

Place cassettes in the refrigerator after receipt. Cassettes may be used until the date printed on the pouch when stored in a refrigerator (36–46°F / 2–8°C).

The cassettes may be stored for up to 30 days at room temperature (48–86°F / 9–30°C). The new expiration date is the date the cassettes are placed at room temperature plus 30 days. Write the new expiration date on the side of the cassette box in the space provided.

NOTE: Once the cassettes have been stored at room temperature, they should not be returned to the refrigerator.

- Do not use a cassette beyond the printed expiration date.
- Do not use a cassette that has been stored at room temperature for more than 30 days.
- Do not reuse cassettes.

Cassette Handling

Cassettes should sit at room temperature for 10 minutes before opening the pouch. Use the cassette as soon as the pouch is opened.

7. Quality Control

External quality control material should be run routinely to show that your system is giving accurate results. We recommend the following quality control procedures for the Alere Cholestech LDX[®] System.

Choice of Materials

Liquid Level 1 and Level 2 controls that work well with the Alere Cholestech LDX[®] System are available. If you use other controls, you will need to establish ranges for the Alere Cholestech LDX[®] System.

Handling

- Follow the instructions that come with your controls.



- Check the expiration date before use. Do not use if expired.
- See “Running a Test” for the procedure.

External Quality Control

External control material should be used to demonstrate that the reagents and the assay procedure perform properly. Good Laboratory Practice principles suggest that controls should be run whenever the laboratory director has any question about test system integrity, reagent storage conditions, or the reliability of any test result.

If the controls do not perform as expected, repeat the test or contact Alere™ Product Service before testing patient samples.

Controls should be tested:

- With each new lot of cassettes;
- With every new shipment of cassettes, even if the lot has been received previously;
- When reagents may have been stored or handled in a way that can degrade their performance;
- As otherwise required by your laboratory's standard quality control procedures;
- As otherwise required by federal, state and local guidelines.

Record the results in a Quality Control Log.

The quality control results should be in range before testing patient samples. See the Alere Cholestech LDX® System User Manual if they are not. Please call Alere Product Support to report any problems or if you have any questions about quality control.

8. Precautions

Warnings and Precautions

1. For professional in vitro diagnostic use only.
2. All blood samples, containers, capillary tubes and materials that have come in contact with blood should be handled as if capable of transmitting infectious disease and discarded into a biohazardous waste container after use.

9. Test Procedure

Calibration

No calibration is performed by the user. Test information is encoded on the brown stripe of the cassette. The brown magnetic stripe is read by the Alere Cholestech LDX® Analyzer each time a cassette is run.

An Optics Check should be run on the analyzer each day that patient samples are tested. See the Alere Cholestech LDX® User Manual for instructions.

NOTE: A warm hand and good blood flow from the puncture site are essential in order to collect a good capillary sample.

WARNING: Squeezing the finger excessively may cause inaccurate test results.

Fingerstick Procedure

1. The patient should sit quietly for five minutes before the blood sample is collected.



2. Put a capillary plunger into the end of a Alere Cholestech LDX® 40 µL Capillary Tube with the red mark. Set aside.
3. Choose a spot that is on the side of **one of the center fingers** of either hand. The fingers and hands should be warm to the touch. To warm the hand, you can:
 - a. Wash the patient's hand with warm water, or...
 - b. Apply a warm (not hot) compress to the hand for several minutes, or...
 - c. **Gently massage the finger from the base to the tip several times to bring the blood to the fingertip.**
4. Clean the site with an alcohol swab. Dry thoroughly with a gauze pad **before pricking the finger.**
5. Firmly prick the selected site with a lancet.
6. Squeeze the finger gently to obtain a large drop of blood. Wipe away this first drop of blood as it may contain tissue fluid.
7. Squeeze the finger gently again while holding it downward until a second large drop of blood forms. **Do not milk the finger.** The puncture should provide a free-flowing drop of blood.
8. Hold the capillary tube horizontally or at a slightly descending angle by the end with the plunger. Touch it to the drop of blood without touching the skin. The tube will fill by capillary action to the black mark. **Do not collect air bubbles.** If it is necessary to collect another drop of blood, wipe the finger with gauze then massage again from base to tip until a large drop of blood forms.
9. Fill the capillary tube within 10 seconds.
10. Wipe off any excess blood from the finger and have the patient apply pressure to the puncture until the bleeding stops.

Using the Minipet® Pipette

Use this procedure to apply a venous blood sample, or control, calibration verification or proficiency testing materials to the cassette. Any pipette that can deliver 40 µL may be used.

1. Firmly attach the pipette tip to the end of the 40 µL MiniPet® Pipette. Use a new tip for each sample.
2. To fill the pipette, push the plunger down as far as you can. Place the pipette tip midway into the sample and **slowly** release the plunger. Confirm that no air bubbles are in the pipette tip.
3. Place the pipette tip into the cassette sample well. Dispense the sample into the cassette sample well by pressing the plunger down. Move the pipette tip out of the sample well before releasing the plunger again.
4. Remove the pipette tip and throw it away in a biohazard waste container.

NOTE: If the plunger is released before the pipette tip is out of the sample well, it will remove the sample just dispensed.

NOTE: Keep the cassette horizontal at all times after applying the sample.

Running a Test

1. If the cassettes have been refrigerated, allow them to come to room temperature (at least 10 minutes) before opening.
2. Make sure the analyzer is plugged in and has warmed up.
3. Remove the cassette from its pouch. Hold the cassette by the short sides **only**. Do not touch the black bar or the magnetic stripe. Place the cassette on a flat surface.

NOTE: Gloves should be worn whenever working with blood samples.

4. Press **RUN**. The analyzer will do a selftest, and the screen will display:

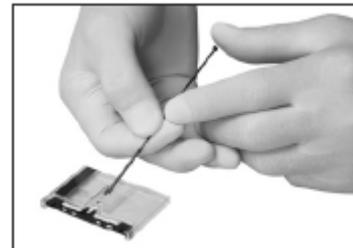
```
Selftest running.
```

```
Selftest OK
```

5. The cassette drawer will open, and the screen will display:

```
Load cassette  
and press RUN.
```

6. Place the sample into the cassette well. Use an Alere Cholestech LDX® Capillary Tube for fingerstick samples. Use a 40 µL pipette for venous blood samples and quality control, calibration verification, and proficiency testing materials.



NOTE: Fingerstick samples must be applied within eight (8) minutes or the blood will clot.

7. Keep the cassette flat after the sample has been applied. **WARNING: Allowing the sample to sit in the cassette will cause inaccurate results. Immediately place the cassette into the drawer of the analyzer.** The black reaction bar must face toward the analyzer. The brown magnetic stripe must be on the right.



8. **DO NOT PUSH IN THE DRAWER.** Press **RUN**. The drawer will close. During the test, the screen will display:

```
[Test Name(s)]  
Running***
```

9. Put everything that touched the blood samples or control, calibration verification, or proficiency testing material into a biohazardous waste container.
10. When the test is complete, the analyzer will beep, and the screen will display:

```
[Test Name]=####  
warnings
```

11. Press **DATA** to view additional results.

12. When the results are outside the measuring range of the test, the screen will display:

```
[Test Name]>###
```

OR

```
[Test Name]<###
```



13. If there is a problem with the test, a message will appear on the screen. See the Troubleshooting section of the Alere Cholestech LDX® System User Manual if this happens.

Please call Alere Product Support to report any problems or if you have questions about the operation of the Alere Cholestech LDX® System.

14. When the drawer opens, remove the cassette, and put it in a biohazardous waste container. Leave the analyzer drawer empty when not in use.
 15. Record the results on the appropriate form.
 16. To run another cassette, press **RUN**. The screen will display:

Load cassette
and press RUN.

17. Repeat step 3, and steps 6 through 15.

NOTE: If you do not want to run another test and the drawer is open, press STOP to close the drawer.

18. Otherwise, after four minutes a beep will sound and the screen will display:

System timeout
RUN to continue

19. If necessary, press the **DATA** button to view the results from the last cassette used.

NOTE: Pressing the RUN button will erase the previous result.

10. Interpretation of Test Results

RESULTS

Test results will be displayed on the screen when the test is complete. Calculated results are displayed after the **DATA** button is pressed.

To convert:

	mg/dL to mmol/L <u>divide mg/dL by</u>	mmol/L to mg/dL <u>multiply mmol/L by</u>
TC	38.664	38.664
HDL	38.664	38.664
TRG	88.54	88.54
LDL	38.664	38.664
GLU	18.018	18.018

11. Limitations

Analyte	Measuring Range mg/dL (mmol/L)	For results outside the measuring range, the LDX displays:	
		Low	High
TC	100 – 500 (2.59 – 12.9)	<100 mg/dL (<2.59 mmol/L)	>500 mg/dL (>12.9 mmol/L)
HDL	15 – 100 (0.39 – 2.59)	<15 mg/dL (<0.39 mmol/L)	>100 mg/dL (>2.59 mmol/L)
TRG	45 – 650 (0.51 – 7.34)	<45 mg/dL (<0.51 mmol/L)	>650 mg/dL (>7.34 mmol/L)
GLU	50 – 500 (2.78 – 27.8)	<50 mg/dL (<2.78 mmol/L)	>500 mg/dL (>27.8 mmol/L)



Additional Limitations That Display N/A:

- If the measured value of TRG is >650 mg/dL (>7.34 mmol/L), the Alere Cholestech LDX® Analyzer displays “N/A” for HDL.
- If the measured value TRG is >400 mg/dL (>4.51 mmol/L), the Alere Cholestech LDX® Analyzer displays “N/A” for the LDL estimate.
- If the measured value of TC, HDL or TRG is outside the measuring range, the Alere Cholestech LDX® Analyzer displays “N/A” for the LDL estimate.

Additional Limitations:

- The glucose test is specific for D-glucose. Other sugars that may be present in the blood do not react in the glucose test (i.e., fructose, lactose).
- Samples with total cholesterol, HDL cholesterol, triglyceride or glucose values outside the measuring range should be sent to a laboratory for testing.
- Performance of the Alere Cholestech LDX® System has not been tested on samples from newborns.
- Blood glucose results performed at altitudes above 5000 feet have not been validated.

Some substances may cause inaccurate results with enzymatic tests. The substances listed below were tested for interference with all analytes. Less than 10% interference was seen at the levels shown.

Substance Concentration (mg/dL)

Ascorbic Acid	1	Hemoglobin	125
Bilirubin	5	Lactose	100
Creatinine	30	Lovastatin (Mevacor)	4
Cysteine	10	Nicotinic Acid (Niacin)	10
Fructose	30	Urea	500
Gemfibrozil (Lopid)	15	Uric Acid	15
Glutathione	1		

- Hematocrits between 30% and 49% do not affect results.
- Blood collection tubes with glycerol should not be used for the triglyceride test.
- Hand creams and soaps with glycerol may cause falsely high triglyceride results.
- The triglyceride test measures triglycerides and free glycerol. Free glycerol usually is less than 20 mg/dL.^{10,11}
- There may be a 6–7% difference in the glucose levels of fingerstick and venous blood.¹²

12. Expected Values

Lipid values are interpreted according to clinical practice guidelines or recommendations that are subject to change over time. Interpretive information for all lipid values is not contained in a single guideline. The following information was compiled from recent guidelines or recommendations of the American College of Cardiology, American Heart Association, and National Lipid Association.^{3,13,14}

Analyte	mg/dL	mmol/L	Classification
TC ^{3,13}	170	4.40	Optimal
HDL	50	1.29	Optimal ^{3,13}
	<40 (men)	<1.03	Low ¹⁴
	<50 (women)	<1.29	Low ¹⁴
TRG ¹⁴	<150	<1.69	Normal
	150-199	1.69 – 2.25	Borderline high



	200-499	2.26 – 5.64	High
	≥500	≥5.65	Very high
LDL¹⁴	<100	<2.59	Desirable
	100 – 129	2.59 – 3.34	Above desirable
	130 – 159	3.36 – 4.11	Borderline high
	160 – 189	4.14 – 4.89	High
	≥190	≥4.91	Very high
Non-HDL¹⁴	<130	<3.36	Desirable
	130 – 159	3.36 – 4.11	Above desirable
	160 – 189	4.14 – 4.89	Borderline high
	190 – 219	4.91 – 5.66	High
	≥220	≥5.69	Very high

TC/HDL Ratio

Clinical practice guidelines do not comment on use of the ratio of total to HDL cholesterol. Various authors have suggested that the TC/HDL ratio is the strongest lipid risk factor and can be a useful summary of coronary heart disease risk.^{15,16} A ratio of 4.5 or less is desirable. A ratio of greater than 6.0 suggests a high risk of coronary heart disease.¹⁵

Glucose

The American Diabetes Association has identified categories of increased risk for diabetes based upon glucose:¹⁷

- Fasting plasma glucose (FPG) 100 -125 mg/dL (5.6 -6.9 mmol/L); impaired fasting glucose
- 2-hr plasma glucose in the 75-g oral glucose tolerance test (OGTT) 140 -199 mg/dL (7.8 - 11.0 mmol/L); impaired glucose tolerance

For these tests, risk is continuous, extending below the lower limit of the range and becoming disproportionately greater at higher ends of the range.

The American Diabetes Association has criteria for the diagnosis of diabetes mellitus based upon glucose:¹⁷

- FPG ≥126 mg/dL (7.0 mmol/L). Fasting is defined as no caloric intake for at least 8 hr.
- 2-h plasma glucose ≥200 mg/dL (11.1 mmol/L) during an OGTT. The test should be performed as described by the World Health Organization, using a glucose load containing the equivalent of 75 g anhydrous glucose dissolved in water.
- In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose ≥200 mg/dL (11.1 mmol/L).

In the absence of unequivocal hyperglycemia, diagnosis should be confirmed by repeat testing. When screening for diabetes, any abnormal glucose result should be referred to a physician for further follow-up.

13. Performance Characteristics

Representative Data: results in individual laboratories may vary from these data. Individual laboratories results may vary from this study due to differences in the testing protocol, and between instruments, calibrations, reagents, and replicates.



Precision	Within-Run Precision Whole Blood (heparin)		Day-to-Day Precision Commercial Control Material	
	Level 1	Level 2	Level 1	Level 2
Total Cholesterol, n =	10	10	20	20
\bar{X} (mg/dL) =	184	299	161	244
SD (mg/dL) =	4.6	7.3	4.3	8.6
CV (%) =	2.5	2.4	2.7	3.5
HDL Cholesterol, n =	10	10	20	20
\bar{X} (mg/dL) =	29	46	29	46
SD (mg/dL) =	1.0	2.2	1.3	2.9
CV (%) =	3.4	4.8	4.5	6.3
Triglycerides, n =	10	10	20	20
\bar{X} (mg/dL) =	256	362	121	276
SD (mg/dL) =	4.0	13.1	2.8	8.7
CV (%) =	1.6	3.6	2.3	3.2
LDL Cholesterol, n =	10	10	20	20
\bar{X} (mg/dL) =	87	197	108	143
SD (mg/dL) =	4.3	7.5	4.6	8.4
CV (%) =	4.9	3.8	4.3	5.9
Glucose, n =	10	10	20	20
\bar{X} (mg/dL) =	103	127	103	311
SD (mg/dL) =	6.4	5.7	3.6	15.4
CV (%) =	6.2	4.5	3.5	5.0

Accuracy (Method Comparison)

The cassette total cholesterol was compared with a validated method traceable to the CDC-modified Abell-Kendall reference method traceable to National Institute of Standards and Technology (NIST) standards.

The cassette HDL cholesterol was compared with a validated method, utilizing dextran sulfate/magnesium chloride precipitation and enzymatic cholesterol determination. The HDL cholesterol comparison method is based on the selected method for HDL cholesterol⁵ and has documented agreement with the CDC Reference Method.

The cassette triglyceride test was compared with a validated method, utilizing hydrolysis with lipase. The comparison method has documented agreement with a CDC Reference Method.

The cassette estimated LDL was compared to that calculated from the above validated total cholesterol, HDL cholesterol and triglycerides methods.

The range of values tested (mg/dL) were as follows:

TC	120 – 300
HDL	26 – 85
TRG	40 – 500
GLU	25 – 575

**Results**

X = Reference Method (serum)

Y = Alere Cholestech LDX® Analyzer (venous whole blood)

Analyte	No. of Pairs	Slope	y-intercept	Correlation Coefficient	Bias at
Total cholesterol	40	0.98	2.41	0.97	200 -1%
HDL cholesterol	40	0.97	0.23	0.95	35 -2%
Triglycerides	40	1.0	0.13	0.99	250 0%
Glucose	40	0.99	1.01	0.98	150 0%

14. Limited Warranty

For the applicable warranty period, Alere warrants that each product shall be (I) of good quality and free of material defects, (II) function in accordance with the material specifications referenced in the product manual, and (III) approved by the proper governmental agencies required for the sale of products for their intended use (the "Limited Warranty"). If the product fails to meet the requirement of the limited warranty, then as a customer's sole remedy, Alere shall either repair or replace, at Alere's discretion, the product. Except for the limited warranty stated in this section, Alere disclaims any and all warranties, express or implied, including but not limited to, any warranty of merchantability, fitness for a particular purpose and non-infringement regarding the product. Alere's maximum liability with any customer claim shall not exceed the net product price paid by customer. Neither party shall be liable to the other party for special, incidental or consequential damages, including, without limitation, loss of business, profits, data or revenue, even if a party receives notice in advance that these kinds of damages might result.

The Limited Warranty above shall not apply if the customer has subjected the product to physical abuse, misuse, abnormal use, use inconsistent with the product Manual or Insert, fraud, tampering, unusual physical stress, negligence or accidents. Any warranty claim by customer pursuant to the Limited Warranty shall be made in writing within the applicable Limited Warranty period.

15. Return Policy

Please contact Alere Product Support prior to returning any defective components. Refer to Contact Alere section for additional information.

16. References

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17. Contact Alere

Alere Product Support

Contact one of the following Alere Product Support Care Centers or your local distributor if you have any questions regarding the use of your Alere™ product. You may also contact us at www.alere.com.

Region	Phone	E mail Address
Europe & Middle East	+ (44) 161 483 9032	EMEproductsupport@alere.com
Asia Pacific	+ (61) 7 3363 7711	APproductsupport@alere.com
Africa, Russia, & CIS	+ (972) 8 9429 683	ARCISproductsupport@alere.com
Latin America	+ (57) 2 6618797	LAprouductsupport@alere.com
Canada	+ (1) 613 271 1144	CANproductsupport@alere.com
US	+(1) 877 308 8289	USproductsupport@alere.com

Alere Customer Service

Contact the following Alere Service Care Center or your local distributor for order and billing assistance. You may also contact us at www.alere.com.

Phone	E Mail Address
+ (1) 877 441 7440	clientservices@alere.com

EN Refer to the CD in the Alere Cholestech LDX® Analyzer package for instructions in English. The instructions are also available from your local distributor.

CS Návod k použití v češtině najdete na disku CD přiloženém v balení analyzátoru Alere Cholestech LDX®. Návod je také k dispozici u vašeho místního distributora.



DA Der henvises til den vedlagte CD i Alere Cholestech LDX-analysatorpakken for instruktioner på dansk. Instruktionerne fås også hos den lokale forhandler.

DE Anweisungen auf Deutsch befinden sich auf der CD in der Verpackung des Alere Cholestech LDX®-Analysegeräts. Die Anleitung ist auch von Ihrem Händler erhältlich.

EL Ανατρέξτε στο CD στη συσκευασία του Αναλυτή Alere Cholestech LDX για οδηγίες στα Ελληνικά. Οι οδηγίες είναι διαθέσιμες από τον τοπικό διανομέα σας.

ES Consulte el CD incluido en el envase del analizador Alere Cholestech LDX® para obtener instrucciones en español. También puede pedir las instrucciones a su distribuidor local.

ET Vaadake CD-d Alere Cholestech LDX® analüsaatori pakendis, sealt leiute ingliskeelsed juhised. Juhiseid on võimalik saada ka oma kohalikult edasimüüjalt.

FR Le CD contenu dans l'emballage de l'analyseur Alere Cholestech LDX® inclut les directives d'utilisation en français. Le mode d'emploi est également disponible auprès du distributeur local.

HU Az utasításokat az Alere Cholestech LDX® analizátor csomagjában lévő CD-n találja. Az utasítások a helyi forgalmazónál is elérhetők.

IT Fare riferimento al CD nella confezione dell'analizzatore Alere Cholestech LDX® per istruzioni in italiano. Le istruzioni sono disponibili presso il distributore di zona.

KO Alere Cholestech LDX® 분석기 패키지에 있는 CD의 영문 지침 문서를 참조하십시오. 지침 문서는 현지 대리점에서도 구하실 수 있습니다.

NL Raadpleeg de cd in de verpakking van de Alere Cholestech LDX® Analyzer voor Engelstalige instructies. De instructies zijn ook verkrijgbaar bij uw lokale distributeur.

NO Hvis du vil ha flere instruksjoner, kan du se CD-en som følger med i Alere Cholestech LCX-analysatorpakken. Instruksjonene fås også hos din nærmeste forhandler.

PL Instrukcja w języku angielskim znajduje się na dysku CD dołączonym do analizatora Alere Cholestech LDX®. Można ją również uzyskać u lokalnego dystrybutora.

PT Consulte o CD no pacote do analisador LDX Alere Cholestech® para instruções em português. As instruções estão disponíveis junto do seu distribuidor local.

PT-BR Consulte o CD no pacote do analisador LDX Alere Cholestech® para instruções em português. As instruções também estão disponíveis com o seu distribuidor local.

RO Consultați CD-ul din pachetul analizorului Alere Cholestech LDX® pentru instrucțiuni în limba română. De asemenea, instrucțiunile sunt disponibile de la distribuitorul dvs. local.

RU Компакт-диск с инструкциями на английском языке находится в упаковке анализатора Alere Cholestech LDX®. Вы также можете получить инструкции у регионального дистрибьютора.

SK Pokyny v angličtine získate z disku CD, ktoré sa nachádza v balíku analyzátoru Alere Cholestech LDX. Pokyny môžete tiež získať od miestneho distribútora.

SV Se CD:n i Alere Cholestech LDX-analysatorförpackningen beträffande instruktioner på svenska. Instruktionerna finns att få hos din lokala återförsäljare.

TH โปรดดู CD ในแพคเกจเครื่องวิเคราะห์ Alere Cholestech LDX® สำหรับคำแนะนำภาษาไทย และมีคำแนะนำที่ตัวแทนจำหน่ายในพื้นที่ของคุณ

TR Türkçe talimat için Alere Cholestech LDX Analizör paketindeki CD'ye başvurun. Talimat yerel distribütörünüzden elde edilebilir.

ZH-CN 简体中文说明书请参阅 Alere Cholestech LDX® 分析仪包装中的 CD。该说明书也可从当地经销商处获取。

ZH-TW 請參考 Alere Cholestech LDX® 分析儀包裝隨附的 CD，取得繁體中文版手冊。您也可以直接向您當地的經銷商索取這些手冊。



Glossary of Symbols

 Catalog Number	 Batch Code	 CRMLN Certified
 CE Mark	 Manufacturer	 Authorized Representative in the European Community
 Do Not Reuse	 <i>In Vitro</i> Diagnostics	 Use By
 Temperature Limitation	 Consult Instructions For Use	 $\Sigma = n$ Contains sufficient for <n> tests

Revision History:

- Updated Summary and Explanation of the Test section
- Updated Expected Values section
- Added Multilingual instruction information
- Updated References

Protected by patents US 6171849, US 7795038 and US 7772007; other rights granted and pending.



Alere Cholestech LDX® System Quick Reference Sheet

Expected Values

	mg/dL	mmol/L
Total Cholesterol (TC)*		
Optimal:	170	4.40
HDL Cholesterol (HDL)*		
Optimal:	50	1.29
Low:**	< 40 (men)	< 1.03
Low:**	< 50 (women)	< 1.29
Triglycerides (TRG)**		
Normal:	< 150	< 1.69
Borderline high:	150 – 199	1.69 – 2.25
High:	200 – 499	2.26 – 5.64
Very High:	≥ 500	≥ 5.65
LDL Cholesterol (LDL)**		
Desirable:	< 100	< 2.59
Above desirable:	100 – 129	2.59 – 3.34
Borderline High:	130 – 159	3.36 – 4.11
High:	160 – 189	4.14 – 4.89
Very High:	≥ 190	≥ 4.91
Non-HDL Cholesterol (non-HDL)**		
Desirable:	< 130	< 3.36
Above desirable:	130 – 159	3.36 – 4.11
Borderline High:	160 – 189	4.14 – 4.89
High:	190 – 219	4.91 – 5.66
Very High:	≥ 220	≥ 5.69
TC/HDL Ratio		
Desirable:	≤ 4.5	
High risk:	≥ 6.0	
Glucose (GLU)†		
Fasting Plasma Glucose		
Normal FPG:	< 100	< 5.6
Impaired:	100 – 125	5.6 – 6.9
Diabetes:	≥ 126	≥ 7.0
Random plasma with classic symptoms		
Diabetes:	≥ 200	≥ 11.1
2-hr plasma (OGTT post 75g glucose)		
Impaired:	140 – 199	7.8 – 11.0
Diabetes:	≥ 200	≥ 11.1

CV Risk Calculator from ACC/AHA*
professional.heart.org/professional/GuidelinesStatements/PreventionGuidelines/UCM_457698_Prevention-Guidelines.jsp

Conversion Factors

	mg/dL to mmol/L	mmol/L to mg/dL
TC	x 0.0259	÷ 0.0259
HDL	x 0.0259	÷ 0.0259
TRG	x 0.0113	÷ 0.0113
LDL	x 0.0259	÷ 0.0259
GLU	x 0.0555	÷ 0.0555

CPT* Codes

Individual Tests	
TC	82465QW
TRG	84478QW
HDL	83718QW
GLU	82947QW

Lipid Panel (TC, HDL TRG)

Lipid Panel	80061QW
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Use QW modifier for CLIA waived tests.

Performance Goals

	NCEP TE	CLIA PT
TC	≤ 8.9%	± 10%
HDL	≤ 13%	± 30%
TRG	≤ 15%	± 25%
LDL	≤ 12%	N/A

Calculated Results

LDL = TC - HDL - (TRG ÷ 5)
 (When results are in mg/dL)
 TC:HDL Ratio = TC ÷ HDL
 non-HDL = TC - HDL
 Calculated tests reported as N/A if any test results used in the calculation are N/A.

Measuring Ranges

	mg/dL	mmol/L
TC	100 – 500	2.59 – 12.9
HDL	15 – 100	0.39 – 2.59
TRG	45 – 650	0.51 – 7.34
GLU	50 – 500	2.78 – 27.8
TRG > 400	(LDL = N/A)	
TRG > 650	(HDL, LDL = N/A)	

- If the measured value of TRG is > 650 mg/dL (> 7.34 mmol/L), the LDX displays "N/A" for HDL
- If the measured value of TRG is > 400 mg/dL (> 4.51 mmol/L), the LDX displays "N/A" for the LDL estimate.
- If the measured value of TC, HDL or TRG is outside the measuring range, the LDX displays "N/A" for the LDL estimate.

Samples

- 40 µL Whole Blood
- Fingerstick: Alere Cholestech LDX® 40 µL Whole Blood Capillary Tube
- Venous: Green-top tube (heparin anticoagulant)

Control Testing Frequency

- Controls should be tested:
- With each new lot of cassettes;
 - With every new shipment of cassettes, even if the lot has been received previously;
 - When reagents may have been stored or handled in a way that can degrade their performance;
 - As otherwise required by your laboratory's standard quality control procedures;
 - As otherwise required by federal, state and local guidelines.

Proficiency Testing (PT)

- AAFP-PT
1.800.274.7911 www.aafp.org
- AAB Proficiency Testing Service
1.800.234.5315 www.aab-pts.org
- American Proficiency Institute
1.800.333.0958 www.api-pt.com
- College of American Pathologists
1.800.323.4040 www.cap.org
- Medical Laboratory Evaluation
1.800.338.2746 www.acponline.org
- Wisconsin State Laboratory of Hygiene
1.800.462.5261 www.slh.wisc.edu/proficiency/

Miscellaneous

CLIA Complexity Category

- Waived: TC, HDL, TRG, GLU, in the whole blood mode

Optics Check Cassette

- Range: 80 – 105

Cassette storage/expiration

- Expiration date at 2 – 8°C
- 30 days at room temperature (9 – 30°C)

Configuration Menu

- Hold down the STOP button to get into menu
- Briskly press DATA button (hold to scroll) to change menu item
- Briskly press RUN to set and move on to the next menu item

Hematocrit

Lipids & Glucose 30 – 49%

Refer to the package insert that accompanies each box of Alere Cholestech LDX® test cassettes for current and complete information.
 *American College of Cardiology (ACC)/American Heart Association (AHA) guidelines; **National Lipid Association recommendations; †American Diabetes Association Clinical Practice Recommendations;
 Test abbreviations: TC, total cholesterol; HDL, HDL cholesterol; TRG, triglycerides; LDL, LDL cholesterol; GLU, glucose; FPG, fasting plasma glucose; OGTT, oral glucose tolerance test;
 Other abbreviations: CV, cardiovascular; NCEP, National Cholesterol Education Program; TE, total error; CLIA, Clinical Laboratory Improvement Amendments.
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 CDV27074 1000205-04 8/17



Ordering Guide

Alere Cholestech LDX® System

Test Cassettes (Box of 10)



Lipid Profile•GLU	10-991
Lipid Profile	10-989
TC•HDL•GLU	10-990
TC•HDL	10-987
TC•GLU	10-988
TC	10-986

Important note: Refrigerate upon arrival

Controls/Calibration Verification



Multianalyte Controls Level 1 & 2 (1 x 2 Levels, 0.25mL each)	88773
Multianalyte Controls Level 1 & 2 (2 x 2 Levels, 2mL each)	88769
Cal Ver Material Lipids/GLU Levels 1-4 (1 x 4 Levels)	88770

Important note: Refrigerate upon arrival

Optics Check Cassette with Case



Optics Check Cassette with Case	10-228
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Carrying Case



Carrying Case	10-973
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Lancets



MediLance® (box of 200)	13-791
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MiniPet™ Pipette/ Pipette Tips



40 µL Lipids/Glucose; Controls/Calibrators/Hep Whole Blood	13-014
Pipette tips (50/bag)	11-010

Alere Universal Printer



Alere Universal Printer	14-973
Printer Cable Kit	11-787

White Printer Labels



For Alere Universal Printer (1 roll of 400)	26333
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Capillary Tubes/ Plungers



Capillary Tubes, 40 µL (50/vial) (Lipids/Glucose)	52193
Capillary Plungers (50/vial)	10-311



1.877.441.7440 | alere.com

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Training Certificate

Training on this date included:

- System Overview
 - User Manual
 - Quick Reference Guide
 - Video (website)
 - Serial Number location
 - Package Insert (PI)

- Installation
 - Environmental conditions
 - Sample volume requirements
 - Sample requirements

- Set-up and Configuration
 - Menu settings
 - Date and time requirements

- Optics Check
 - Storage and handling of Optics Check Cassette
 - Frequency of testing
 - Logging results

- Test Procedure
 - Storage and handling of test cassettes
 - Your testing protocol

- Quality Control
 - Storage and handling of control material
 - Frequency of testing
 - Sample requirement
 - Logging results

- Fingerstick Procedure
 - Ancillary capillary tube requirements
 - Proper fingerstick procedure
 - Running a test

- Troubleshooting
 - User Manual
 - Alere™ Product Support: 1.877.308.8289

- Limitations
 - Hematocrit
 - Lipid limits

Print Name of Trainer	Signature of Trainer	Date
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Print Name of Trainee	Signature of Trainee	Date
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Print Name of Institution/Facility



Alere Cholestech LDX® System Post-Training Quiz - POL

Name: Date:

Facility/Institution:

Trainer: Score:

Select the correct answer for each question

1. The operating temperature and humidity for the Alere Cholestech LDX® System is:
 - a. 68°F - 87°F, 20 - 80% relative humidity
 - b. 56°F - 78°F, 10 - 70% relative humidity
 - c. 50°F - 90°F, humidity irrelevant
 - d. 32°F - 104°F, 0 - 100% relative humidity
2. How long are the Test Cassettes stable when stored in the refrigerator?
 - a. 30 days
 - b. 60 days
 - c. Until the expiration date on the pouch
 - d. Indefinitely
3. How long are the Test Cassettes stable once brought to room temperature in the foil pouch?
 - a. 10 days
 - b. 20 days
 - c. 30 days
 - d. 45 days
4. How often should the Optics Check Cassette be tested?
 - a. Every day prior to patient testing
 - b. Every 30 days
 - c. When a new lot of Test Cassettes is used
 - d. At initial set up only
5. If an Optics Check result is out of range, I can still use the Alere Cholestech LDX® System providing:
 - a. I run the controls and they are in range
 - b. I clean the Alere Cholestech LDX® Analyzer
 - c. I rerun the Optics Check (same or different one) and it passes
6. How often should the liquid Quality Control Material (Levels 1 and 2) be run?
 - a. Each shipment of Test Cassettes
 - b. Each new lot of Test Cassettes
 - c. When Test Cassette storage or handling is questionable
 - d. More frequently when state regulations require
 - e. All the above
7. If my liquid Quality Control Material is out of range I can still test patients providing:
 - a. The Optics Check Cassette passes
 - b. I re-run of the Quality Control material and it passes
 - c. I reboot the Alere Cholestech LDX® Analyzer
8. All of the following contribute to a successful fingerstick test EXCEPT:
 - a. Ensuring the finger is warm and has good circulation
 - b. Filling the capillary tube within 10 seconds
 - c. Milking the finger
 - d. Lowering the hand below the heart
 - e. Performing a firm and deep puncture
9. How long can the sample sit in the Test Cassette before inserting into the Alere Cholestech LDX® Analyzer tray?
 - a. It must be inserted right away; press RUN right away
 - b. It must be inserted right away; press RUN within 5 minutes
 - c. Wait for the sample to absorb and then insert; press RUN right away
 - d. It is up to the operator, timing is not an issue
10. All of the following can negatively influence Test Cassette performance EXCEPT:
 - a. Air bubbles in the capillary tube
 - b. Slow filling of the capillary tube
 - c. Clotting in the sample well
 - d. Holding the cassette by the sides
11. How long can the sample stay in the capillary tube?
 - a. 2 minutes
 - b. 8 minutes
 - c. Less than 1 minute
 - d. 10 minutes
12. What does the RUN button do?
 - a. Opens the tray, starts a test, and scrolls through the configuration menu
 - b. Opens the tray, closes the tray, changes the configuration menu options
 - c. Opens the tray, reviews old data, enters the configuration menu
 - d. Powers on the analyzer, reviews old data, and scrolls through the configuration menu

Alere, Inc provides these training documents for the convenience and use of our customers. The customer is responsible for certifying the competency of all users of the Alere Cholestech LDX® System at their facility, in accordance with the laboratory policies and procedures at the facility. This post-training quiz does not cover all scenarios. Information is subject to change. Call Alere's Technical Services hotline for the most recent information.
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Alere Cholestech LDX® System Answer Key

Post Training Quiz Answer Key:

- 1. The operating temperature and humidity for the Alere Cholestech LDX® System is:**
 - a. 68°F - 87°F, 20 - 80% relative humidity
- 2. How long are the Test Cassettes stable when stored in the refrigerator?**
 - c. Until the expiration date on the pouch
- 3. How long are the Test Cassettes stable once brought to room temperature in the foil pouch?**
 - c. 30 days
- 4. How often should the Optics Check Cassette be tested?**
 - a. Every day prior to patient testing
- 5. If an Optics Check result is out of range, I can still use the Alere Cholestech LDX® System providing:**
 - c. I rerun the Optics Check (same or different one) and it passes
- 6. How often should the liquid Quality Control Material (Levels 1 and 2) be run?**
 - e. All the above
- 7. If my liquid Quality Control Material is out of range I can still test patients providing:**
 - b. I re-run of the Quality Control material and it passes
- 8. All of the following contribute to a successful fingerstick test EXCEPT:**
 - c. Milking the finger
- 9. How long can the sample sit in the Test Cassette before inserting into the Alere Cholestech LDX® Analyzer tray?**
 - a. It must be inserted right away; press RUN right away
- 10. All of the following can negatively influence Test Cassette performance EXCEPT:**
 - d. Holding the cassette by the sides
- 11. How long can the sample stay in the capillary tube?**
 - b. 8 minutes
- 12. What does the RUN button do? (POL quiz only)**
 - a. Opens the tray, starts a test, and scrolls through the configuration menu

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