Nanopia KL-6 Reagent

INTENDED USE
For the quantitative measurement of sialylated carbohydrate antigen (KL-6) concentration in serum or plasma.

SUMMARY
KL-6 is a sialylated carbohydrate antigen that was detected by Kohno et al. in 1985. It is a macromolecule with a molecular weight of not less than one million produced by type II alveolar epithelial cells and is a mucin which belongs to MUC-1 in cluster 9. It has been confirmed that the serum KL-6 level is significantly higher in patients with interstitial pneumonia than in healthy volunteers or patients with other respiratory diseases, and it has been shown by ROC analysis that serum KL-6 is a diagnostically useful indicator. In addition, because serum KL-6 levels are significantly higher in patients with active interstitial pneumonia than in patients with inactive pneumonia, serum KL-6 is considered to be useful for assessing disease activity. Furthermore, it has been noted that this parameter changes according to the pathology of interstitial pneumonia during follow-up.

PRINCIPLE
Sialylated carbohydrate antigen KL-6 (KL-6) in samples agglutinates with mouse KL-6 monoclonal antibody coated latex through the antigen-antibody reaction. The change in absorbance caused by this agglutination is measured to determine the KL-6 level.

REAGENTS
Composition

<table>
<thead>
<tr>
<th>Component</th>
<th>Ingredients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reagent 1</td>
<td>Buffer</td>
</tr>
<tr>
<td>Reagent 2</td>
<td>Buffer Mouse anti-human KL-6 monoclonal antibody-coated latex</td>
</tr>
</tbody>
</table>

Precautions and Warnings
1. For In Vitro Diagnostic use.
2. Do not use the reagents beyond the expiration date printed on the label.
3. Warning: All specimens used in the test should be considered potentially infectious. Universal precautions as they apply to your facility should be used for handling and disposal of materials during and after testing.
4. Nanopia KL-6 Reagents must be used with the Nanopia KL-6 Calibrator.
5. Caution: Avoid freezing reagents.
6. Caution: Do not store below 2°C.
7. Disposal of all waste material should be in accordance with local guidelines.
8. Do not replenish reagents.
9. After completion of measurement, tighten close the container and store in a refrigerator.
10. Avoid mixing reagents from different lots.
11. Avoid exposing reagents to direct sunlight.
12. Be sure to perform calibration when either the lot of Reagent 1 or that of Reagent 2 is changed.

Preparation
Reagent 1: Liquid, ready to use
Reagent 2: Liquid, ready to use
Invert to mix before use. Avoid the formation of foam.

Storage and Stability
Unopened reagent is stable until the expiration date shown on the label when stored at 2-8°C. Once opened, the reagent is stable for 4 weeks at 2-8°C.

DO NOT FREEZE.

Indications of Deterioration
Presence of color change or microbial growth may indicate deterioration. Inability to recover control values.

SPECIMEN COLLECTION AND PREPARATION
Serum or plasma is the recommended samples. Use standard sample collection and preparation methods.

If not analyzed promptly, serum or plasma specimens may be stored at 2-8°C for 1 week. If specimens need to be stored for more than 1 week, they may be preserved at -80°C or below for up to 4 weeks.

Allow samples to rise to room temperature (15-30°C) before measurement.

Samples may be frozen and thawed once.

PROCEDURE
Assay
Below is a general example of the Nanopia KL-6 assay procedure for an automated analyzer. All analyzer applications should be validated.

Reagents
<table>
<thead>
<tr>
<th>Reagent 1: 150 μL</th>
<th>Reagent 2: 50 μL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sample: 2.5 μL</td>
<td></td>
</tr>
</tbody>
</table>

5 min incubation

Absorbance 1 570/800 nm
Absorbance 2 570/800 nm

KL-6 Result

For assistance with applications on automated analyzers please contact Sekisui Diagnostics (UK) Limited Technical Marketing at +44 (0)1732 220022 or technicalmarketinguk@seksuidiagnostics.com.

Materials Provided
Nanopia KL-6 Reagents 1 and 2 are required for the measurement of KL-6. The Nanopia KL-6 reagents are packaged and sold separately. The following items may be included in the package you receive.

<table>
<thead>
<tr>
<th>Description</th>
<th>Configuration</th>
<th>Catalog Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nanopia KL-6 Reagent 1</td>
<td>2 x 24 mL</td>
<td>ES336904</td>
</tr>
<tr>
<td>Nanopia KL-6 Reagent 2</td>
<td>2 x 8 mL</td>
<td>ES336911</td>
</tr>
</tbody>
</table>

Materials Required but not Provided

<table>
<thead>
<tr>
<th>Description</th>
<th>Configuration</th>
<th>Catalog Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nanopia KL-6 Calibrator</td>
<td>4 Levels x 0.5 mL</td>
<td>ES336928</td>
</tr>
<tr>
<td>Nanopia E Control (Level 1, 2)</td>
<td>Level 1 - 3 x 1 mL</td>
<td>SC305573</td>
</tr>
<tr>
<td>Level 2 - 3 x 1 mL</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

• Analyzer capable of running two-reagent chemistries.

Calibration
Only the Nanopia KL-6 Calibrator should be used to calibrate the Nanopia KL-6 assay. The assigned values of the KL-6 Calibrators are traceable to an in-house standard.

Refer to the instrument operator’s manual for analyzer specific calibration procedures and for guidance in determining calibration frequency.

Quality Control values should be within the expected ranges.

Quality Control
Reliability of test results should be monitored routinely with quality control materials or serum pools that reasonably represent performance with patient specimens. Controls or serum pools should be used to monitor that the reagents are functioning properly and that correct procedures are being followed. An acceptable range for each lot of control material should be established by the laboratory. If control values are not within the expected range, follow normal troubleshooting procedures.

Quality control requirements should be established in accordance with local, state and/or federal regulations, or accreditation requirements.
RESULTS

Limitations/Interfering Substances
Criterion: Recovery within ± 10% of initial value

Intralipos concentration of up to 5% did not interfere in samples with KL-6 concentrations of 437 and 930 U/mL.

Hemoglobin concentration of up to 500 mg/mL did not interfere in samples with KL-6 concentrations of 393 and 843 U/mL.

Conjugated Bilirubin concentration of up to 20 mg/dL did not interfere in samples with KL-6 concentrations of 394 and 842 U/mL.

Unconjugated Bilirubin concentration of up to 20 mg/dL did not interfere in samples with KL-6 concentrations of 397 and 838 U/mL.

Formazin turbidity of up to 2000 units did not interfere in samples with KL-6 concentrations of 392 and 845 U/mL.

Rheumatoid factor concentration of up to 500 IU/mL did not interfere in samples with KL-6 concentrations of 432 and 924 U/mL.

Reactions with non-target substances or interfering reactions may be encountered. If measurement values or results appear unreliable, repeat the measurement after dilution, if necessary; or use another analytical method.

KL-6 levels may be increased in patients with pulmonary tuberculosis and extensive lesions or patients with malignant tumors, such as lung, breast, and pancreatic cancer. Carefully assess the measurements obtained in such patients.

Expected Values
The values provided are those based on a Japanese population sample set.
1. Normal range for reference³
   - 105.3 - 401.2 U/mL
2. Cut-off value³
   - 500 U/mL

Each laboratory should confirm the reference interval for the patient population it serves.

SPECIFIC PERFORMANCE CHARACTERISTICS

Method Comparison

Comparative performance studies were conducted using the KL-6 Reagent on the Roche/Hitachi® 917 clinical analyzer

<table>
<thead>
<tr>
<th>Comparative performance between serum and plasma</th>
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</tr>
</tbody>
</table>

| n=70 |
| Slope | 0.96 |
| Intercept (U/mL) | -6.2 |
| Correlation Coefficient (r) | 0.999 |

Sensitivity
1. Reagent blank: Absorbance is 10 mAbs or lower.
2. Sensitivity of the KL-6 assay: Absorbance of KL-6 per 100 U/mL ranges from 2.3 to 11.5 mAbs.

Accuracy
85-115% to the assigned values

Precision
CV=10% or lower (N=10)

Within run reproducibility using three reagent lots and three samples (n=10)

<table>
<thead>
<tr>
<th>Reagent Lot</th>
<th>Sample</th>
<th>Mean (U/mL)</th>
<th>CV (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>007</td>
<td>A</td>
<td>355</td>
<td>0.5</td>
</tr>
<tr>
<td></td>
<td>B</td>
<td>822</td>
<td>0.7</td>
</tr>
<tr>
<td></td>
<td>C</td>
<td>2043</td>
<td>0.4</td>
</tr>
<tr>
<td>008</td>
<td>A</td>
<td>363</td>
<td>1.1</td>
</tr>
<tr>
<td></td>
<td>B</td>
<td>839</td>
<td>0.4</td>
</tr>
<tr>
<td></td>
<td>C</td>
<td>2088</td>
<td>0.4</td>
</tr>
<tr>
<td>009</td>
<td>A</td>
<td>373</td>
<td>1.4</td>
</tr>
<tr>
<td></td>
<td>B</td>
<td>852</td>
<td>0.8</td>
</tr>
<tr>
<td></td>
<td>C</td>
<td>2130</td>
<td>0.5</td>
</tr>
</tbody>
</table>

Linearity
Using a Roche/Hitachi® 917 automated analyzer the KL-6 method is linear from 50-5000 U/mL.

If the concentration of KL-6 in a sample exceeds the range of measurement, dilute the sample with physiological saline, and repeat the measurement. Multiply the result by the dilution to obtain the KL-6 concentration in the sample.

References
7. Data on file at Sekisui Medical.
Definitions for Symbols

- REF Catalog number
- IVD For in vitro diagnostic use
- 2°C Temperature limitation
- Manufactured by
- Use by
- LOT Batch code
- Consult instructions for use
- Caution, consult accompanying documents
- EC REP Authorized Representative in the European Community
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