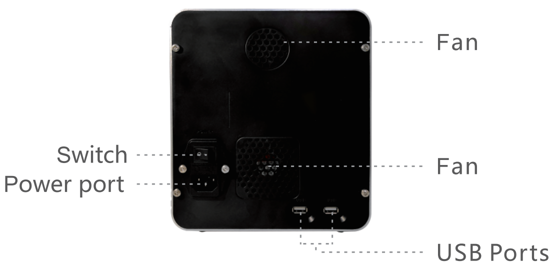
SMT-120VP Multifunctional Automatic Biochemistry Analyzer Easy-Start Guide

Overview

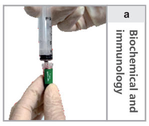


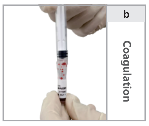
Preparation

1.Preparing a reagent disc

a. Take a reagent disc from refrigerator
b. Place reagent disc with sealed pouch in room temperature for 20 minutes

* Low temperature reagent disc may cause unreliable test result.





2.Sample processing

a. Inject sample to the Heparin lithium anticoagulant tube, and put on the cap
b. Inject sample to the Sodium citrate anticoagulant tube, and put on the cap

* Should be injected 0.5ml whole blood to black line.
* Other anticoagulant tubes may cause unreliable test results.
* The needle must be removed before injection to avoid hemolysis.

3.Mixing Well

Method 1:
Turn tube upside down slightly 3-5 times (high volume)
Method 2:
Flick the tube slightly 3-5 times (low volume)

* If the sample and the anticoagulant did not mix well, the test result might unreliable.

Running a Test

1.Turning on the analyzer

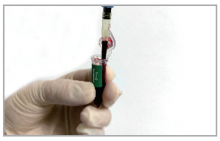
Connect the power, turn on the switch, wait for booting until showing home screen

* The analyzer will do self test and warming up.
* It need about 5 minutes to warm the disc chamber to reach operating temperature.

3.Inserting disc and starting test

Click “Prepare Analysis”
The drawer opened and insert disc
Click “Start Test”
The drawer closed and start testing

* During the test, the user can enter the sample information.



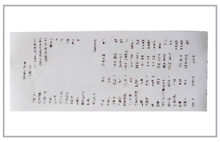
2.Inject sample

a. Open the packing and take out the reagent disc
b. Inhale 100 µl sample with pipettor of first gear

* recommend 100 µl quantitative pipettor.

c. Inject the sample to the hole with pipettor of first gear

* Release the button of pipettor after needle removing from the hole.



4.Printing Out

The test will be finished in 12 minutes and then the drawer will open automatically.

* The default setting is the report will be printed out immediately and automatically after testing.
* Results outside the reference range are indicated in the results with clinical meaning only for veterinary version.
* The reference range will not be printed in the report when the sample type is not selected.

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*It is recommended to post this Easy-Start Guide to where is easy to observe.
*Please handle the analyzer with care. Strong external force may cause damage to the analyzer.
*Make sure the working temperature of analyzer at 10-32°C, relative humidity≤85%.
*Clean the exterior case and drawer of the analyzer periodically with mild detergent.
*For more details, please refer to User Manual.
*Please use neutral cleaning fluid to wipe the surface of the instrument and reagent tray bracket, and carefully operate!

*** Note: Hemolysis will affect the analysis results. Gently sampling and mixing the sample in the anticoagulant tube to avoid hemolysis, flip up and down several times.**

If you have any question or need any help, please contact our after-sales service team or the local distributor.
877-722-8910 or Email at: contactsales@carolinachemistries.com

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Analytes and Clinical Significance

Analytes	Organ	Clinical Significances
ALB (Albumin)	Liver	Liver secretion, liver disease, kidney disease, dehydration, gastrointestinal diseases or parasites
TP (Total Protein)	Systemic	Kidney disease, dehydration or gastrointestinal diseases
GLOB* (TP-ALB)	Systemic	Chronic inflammatory disease including filariasis, virus, parasite or bacterial infection
A/G* (ALB/GLOB)	Liver	Low A/G may caused by renal dysfunction, amyloidosis, inflammation, infection, ga strointestinal disease, immune-induced liver failure or malabsorption
TB (Total Bilirubin)	Liver and Gallbladder	Anemia or bile duct disease
GGT (Gamma-GT)	Liver and kidney	Liver disorder
AST (Aspartate Aminotransferase)	Liver	Liver or muscle disease
ALT (Alanine Aminotransferase)	Liver	Liver disease or liver disorder
ALP (Alkaline Phosphatase)	Liver	Liver disease
TBA (Bile Acids)	Liver	Chronic liver disease
AMY (Amylase)	Pancreas	Pancreatic disease
LPS	Pancreas	Determine the cause of prerenal or postrenal
LDH (Lactate Dehydrogenase)	Liver	Liver diseases, especially in birds and reptiles
CK (Creatine Kinase)	Muscle	Muscle injury or neurological disease
CREA (Creatinine)	Kidney	Muscle metabolites, kidney disease or urethral obstruction
BUN (Blood Urea Nitrogen)	Kidney	Kidney disease, and sometimes other reasons, such as diet, liver disease or dehydration can also cause abnormal
B/C* (BUN/Crea)	Kidney	Indication of pancreatic disease
GLU (Glucose)	Systemic	Physical condition of pets is poor or sick, such as diabetes may cause abnormal
LAC (Lactate)	Systemic	It is an indicator of diagnosis, monitoring and prognosis of clinical emergency and severe cases.
TC (Cholesterol)	Liver and kidney	Liver disease, kidney disease or endocrine abnormalities
TG (Triglycerides)	Pancreas/Systemic	Indicator of fat content in blood
tCO_2 (Bicarbonate)	Systemic	Primary metabolic alkalosis and acidosis, primary respiratory alkalosis and acidosis
Ca (Calcium)	Systemic	A variety of diseases, such as lactation, malnutrition, cancer etc.
PHOS (Phosphorus)	Kidney	Increased phosphorus level are indicators of kidney disease, especially in advanced nephropathy
Mg (Magnesium)	Kidney	Disorder of adrenal glands or renal
K^+ (Potassium)	Systemic	Provide the most important buffer environment for cells and help maintain acid-base balance and osmotic pressure
Na^+ (Sodium)	Systemic	Maintain the body osmotic pressure and acid-base balance and transmission nerve impulses
Cl^- (Chlorine)	Systemic	Mainly in the extracellular fluid, to maintain cell integrity by osmotic pressure
pH (Pondus Hydrogenii)	Systemic	Blood pH index
APTT (Actived partial thromboplastin)	Systemic	A high second value may be due to a lack of endogenous coagulation factors, and surgery may involve bleeding risks. Thrombosis and myocardial infarction may occur when the second value is low
PT (Prothrombin)	Systemic	A high second value may be due to a lack of exogenous coagulation factors, and surgery may involve bleeding risks. Thrombosis and myocardial infarction may occur when the second value is low
TT (Thrombin)	Systemic	A high second value may be due to the period of DIC hyperfibrinolysis, increased FDP or decreased fibrinogen, and there may be a risk of bleeding during surgery
Fib (Fibrinog)	Systemic	Low levels may be due to congenital fibrinogen deficiency or severe liver disease, and there may be a risk of bleeding during surgery. High content may cause thrombosis and myocardial infarction

*Note: The clinical significance listed above is only for reference and is not a direct basis for the judgment of the disease. The judgment of the disease should be determined by the clinician based on the clinical manifestations and other objective facts.

DISTRIBUTED BY: *Seamaty keeps the right for final interpretation.

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