

LAMPIRAN

LAMPIRAN 1. Surat pernyataan persetujuan untuk ikut serta dalam penelitian atau *informed consent*

Saya yang bernama Nanang Kusmana, S.Si dengan jabatan selaku Nasional manager mutu dan pengembangan produk laboratorium klinik Pramita Jalan RE Martadinata Kota Bandung dengan sukarela memberikan izin untuk mengambil data hasil pemeriksaan Aktivitas enzim AST dan ALT yang dibutuhkan dalam penelitian ini tanpa tekanan atau paksaan siapapun.

Bandung, Juli 2020

Nasional Manager Mutu dan
Pengembangan Produk,

Nanang Kusmana, S.Si

LAMPIRAN 3. DATA PEMERIKSAAN AST dan ALT

No.	Gender	Age	Fungsi Hati		Faal Ginjal		DM	Profil Lipid		Urinalisa		Riwayat Kesehatan	Tensi (mmHg)		EKG
			SGOT	SGPT	Ureum	Creatinin		Gluk. P	Koles. T	Trig	Protein		Glukosa	Sistolik	
1	L	30	18	41	20.0	1.05	83	198	117	Negatif	Negatif	Gastritis (maag), Kacamatata Minus, Kacamatata Slander, Sinusitis	120	80	Dalam batas normal
2	L	24	12	15	19.3	0.65	83	195	72	Negatif	Negatif	Operasi saluran pencernaan, Kacamatata Minus, Kacamatata (+)	(110/70)		Sinus bradycardia.
3	L	25	26	33	21.1	0.84	90	186	80	Negatif	Negatif	Amandeltonsilitis, Lain-lain (Alergi), Typoid, Lain-lain (Penyakit daerah tropis)	120	80	SR, HR 60 x/m, Normo ECG
4	L	25	26	30	19.0	0.80	95	140	65	Negatif	Negatif	Tidak Ada	120	80	Normal ECG
5	L	25	22	34	16.3	1.09	75	129	55	Negatif	Negatif	Haemorrhoid (wasitrambeben), Kacamatata Minus, Alergi Htrupan, Lain-lain (Alergi)	(120/80)		Normal sinus rhythm.
6	L	25	25	38	15.1	0.87	74	133	64	Negatif	Negatif	gangguan penglihatan, alergi debu	(110/70)		Normal sinus rythm.
7	L	26	18	35	17.1	0.80	95	183	74	Negatif	Negatif	-	110	70	Normal Sinus Rhythm
8	L	26	35	42	19.9	0.82	92	184	85	Negatif	Negatif	Pernah dipapnne (DDB) dan tifoid 3 tahun yang lalu dan Operasi (1mur 1 tahun), Alergi, udara, Maag/gastritis	120	70	Sinus Reme, HR 70x/menit, Normoaxis
9	L	27	23	23	12.8	0.90	104	198	76	Negatif	Negatif	-	110	80	Normal Sinus Rhythm
10	L	27	15	17	18.3	0.78	100	180	53	Negatif	Negatif	Typoid	120	80	Sinus arthythmia (normal varian) Normal ECG
11	L	27	22	13	21.0	1.06	89	168	62	Negatif	Negatif	Pernah dirawat dirumah sakit Memakai kacamatata	120	80	Irana sinus 80 x/m, axis frontal Normal - EKG Normal
12	L	27	16	21	20.2	1.04	92	183	77	Negatif	Negatif	Pernah dipapnne dan Operasi (Lusus buntu tahun 2017).	120	80	Sinus irine, HR 65x/menit, Normoaxis,
13	L	27	18	29	21.6	0.97	96	194	98	Negatif	Negatif	Pernah Operasi (Maag 1 tahun yang lalu), Pernah Operasi (Angkat kucing kodok, Sinusitis tahun 2016).	120	80	Sinus Reme, HR 62x/menit, Reguler
14	L	27	23	48	16.7	1.00	94	177	108	Negatif	Negatif	Pernah operasi karena kecelakaan dan direposisi, Alergi debu, alergi obat (asam mefenamu), ambeien.	(100/70)		Sinus bradycardia 53 bpm
15	L	27	17	16	26.6	1.05	75	180	63	Negatif	Negatif	-	(110/80)		Normo sinus rhythm
16	L	27	18	22	14.3	0.90	82	177	106	Negatif	Negatif	-	(113/66)		Within Normal Limit Findings Within Normal Limit ECG
17	L	28	26	28	17.0	0.90	98	197	107	Negatif	Negatif	Kacamatata Minus	120	80	Dalam batas normal
18	L	28	18	46	23.0	0.89	109	139	144	Negatif	Negatif	Asma, Kacamatata Minus	120	80	Normal ECG
19	L	28	29	36	25.7	0.90	91	154	77	Negatif	Negatif	-	100	80	Normal Sinus Rhythm
20	L	28	14	13	19.3	0.80	92	181	114	Negatif	Negatif	Gastritis (maag), Kacamatata Minus, Kacamatata Slander	120	70	Normal Sinus Rhythm

No.	Gender	Age	Fungsi Hati		Faal Ginjal		D M Gluk. P < 100 Diagnosis DM ≥ 126	Profil Lipid		Urinalisa		Riwayat Kesehatan	Tensi (mmHg)		EKG
			SGOT L: < 37	SGPT L: < 50	Ureum 12.8 - 42.8	Creatinin L: 0.67 - 1.17		Koles. T < 200	Trig < 150	Protein Negatif	Glukosa Negatif		Sistolik	Diastolik	
21	L	28	19	12	25.7	0.70	73	185	51	Negatif	Negatif	Gastritis (maag), Kacamatia minus, Operasi caesar	100	70	Normal sinus ritms
22	L	28	17	15	17.7	1.08	83	184	96	Negatif	Negatif	Hemorrhoid (+)	100	60	Normal
23	L	28	19	20	21.3	0.78	97	197	92	Negatif	Negatif	Pemah depnane dan deperasi (Cesar, Bulan 2 Tahun 2019)	100	60	Sinus Ritme, HR 67x/menit, Normalaxis
24	L	28	12	17	17.1	0.82	81	178	115	Negatif	Negatif	Tidak ada	110	70	Normal Sinus Rhythn Normal ECG
25	L	28	24	34	21.1	0.95	88	182	109	Negatif	Negatif	Memakai kacamatia, Tpus	120	64	Normal Sinus Rihm, 59-60v/ menit, Normalaxis
26	L	28	24	33	18.3	0.90	94	183	103	Negatif	Negatif	Tidak Ada	110	60	Normal ECG
27	L	28	19	15	26.2	1.13	100	174	89	Negatif	Negatif	Pemah opname karena asam lambung. Riwayat alergi dmng (120/80)	Normal		Normal
28	L	29	18	23	33.1	1.10	93	171	123	Negatif	Negatif	Gastritis (maag), Haemorrhoid (wasir/ambeben), Kacamatia Minus, Kacamatia Siletder, Infeksi saluran	110	80	Dalam batas normal
29	L	29	18	27	17.8	1.00	92	157	67	Negatif	Negatif	Asma, DHF/Demam berdarah, Typoid	120	80	Dalam batas normal
30	L	29	17	11	21.4	0.92	83	171	52	Negatif	Negatif	gangguan penglihatan	120	80	Normal Sinus Rhythn Normal ECG
31	L	29	19	25	25.7	0.84	80	165	141	Negatif	Negatif	-	(110/70) Normal		Normal sinus rhythm
32	L	29	23	51	27.8	0.63	85	176	131	Negatif	Negatif	Gastritis (maag), Tuberculosis (TBC)	(100/70) Normal		Normal sinus rhythm
33	L	29	24	27	28.0	1.00	99	179	110	Negatif	Negatif	kacamatia minus	(110/70) Normal		Dalam batas normal
34	L	30	17	25	16.2	0.90	97	184	89	Negatif	Negatif	Haemorrhoid (wasir/ambeben), Kacamatia Minus	120	80	Dalam batas normal
35	L	30	16	23	25.7	1.10	75	171	51	Negatif	Negatif	-	110	70	Normal sinus ritms.
36	L	30	27	36	18.8	1.01	94	176	82	Negatif	Negatif	Typoid, Inteksi usus	130	70	Sinus artina (varian normal) HR : 77 bpm
37	L	30	17	19	17.1	0.93	98	177	121	Negatif	Negatif	Alergi Htupan, DHF/Demam berdarah, Typoid	(100/60) Normal		Normal sinus rhythm
38	L	30	21	22	17.0	0.97	96	155	72	Negatif	Negatif	Asma, Lain-lain (Alergi)	(96/70) Normal		Normal sinus rhythm
39	L	30	14	27	16.6	0.95	89	193	95	Negatif	Negatif	-	(110/80) Normal		NSR 61 bpm, axis N - Normal resting ECG
40	L	30	21	17	25.3	0.91	87	189	99	Negatif	Negatif	Kacamatia Minus	(110/80) Normal		Normal

No.	Gender	Age	Fungsi Hati		Faal Ginjal		DM	Profil Lipid		Urinalisa		Riwayat Kesehatan	Tensi (mmHg)		EKG
			SGOT L: < 37	SGPT L: < 50	Ureum 12.8 - 42.8	Creatinin L: 0.67 - 1.17		Gluk. P < 100	Koles. T < 200	Trig < 150	Protein Negatif		Glikosa Negatif	Sistolik	
41	L	30	13	10	16.9	0.84	74	148	81	Negatif	Negatif	-	(110/70) Normal	Normal sinus rhythm	
42	L	30	27	53	20.5	0.70	89	186	94	Negatif	Negatif	Pernah operasi tangan kiri dipusing pen	(100/70) Normal	Dalam batas normal	
43	L	31	29	49	22.1	0.96	98	193	96	Negatif	Negatif	Pernah operasi, Alergi	130	Normal sinus rhythm	
44	L	31	15	19	20.1	0.83	96	147	90	Negatif	Negatif	Pernah dopname (Infeksi saluran pencernaan, Dare tahun 2018), Demam berdarah dan Tifus (Tahun 2015)	110	HR : 80 bpm EKG Normal	
45	L	31	15	19	17.4	0.96	99	186	70	Negatif	Negatif	Tidak ada	120	80	Sinus ritme, HR 71/mentil, Normalaxis.
46	L	31	20	33	16.3	0.80	89	196	129	Negatif	Negatif	Bata warna	(111/70) Normal	Normal	
47	L	31	17	27	20.1	0.90	94	175	49	Negatif	Negatif	Pernah opname karena virus, Maag	(110/80) Normal	Normal	
48	L	31	17	32	19.7	1.00	92	171	136	Negatif	Negatif	-	(100/70) Normal	Normal	
49	L	31	24	40	19.4	1.00	90	190	134	Negatif	Negatif	Kacamata Minus, Kacamata Sander, Nyeri punggung/betek pah., Lain-lain (Alergi)	(100/80) Normal	Irama sinus 75 x/ment. EKG normal	
50	L	31	13	11	15.9	1.01	94	149	123	Negatif	Negatif	-	(110/70) Normal	Normal	
51	L	31	18	18	21.0	0.90	85	159	93	Negatif	Negatif	Alergi Hrapan	(120/80) Normal	- Normal sinus ritme - Normal ECG	
52	L	31	28	25	32.1	0.61	93	159	87	Negatif	Negatif	Kacamata Sander	(120/70) Normal	Normal sinus rhythm	
53	L	31	18	36	15.0	0.83	89	135	115	Negatif	Negatif	Baruk lebih dari 1 bulan, Kacamata Minus, Kacamata Sander	(110/70) Normal	Normal sinus rhythm.	
54	L	32	14	23	21.5	0.90	89	157	58	Negatif	Negatif	Gastritis (maag)	130	80	Dalam batas normal
55	L	32	19	30	26.5	0.91	87	169	123	Negatif	Negatif	Obahraga : 1x/minggu	120	70	Normal
56	L	32	24	34	30.8	1.09	103	192	54	Negatif	Negatif	Alergi debu, Maag	120	70	Normal sinus rhythm
57	L	32	19	18	20.9	1.08	96	193	87	Negatif	Negatif	-	(120/80) Normal	Normal ECG	
58	L	32	33	32	20.7	1.05	82	145	65	Negatif	Negatif	Lain-lain (Sistem Pendengaran/HTT), Lain-lain (Gigit & Saluran Kamb), Lain-lain (Tulang, Sendi & Otot)	(120/80) Normal	- Normal sinus ritme - Normal ECG	
59	L	32	16	11	13.7	0.98	89	128	73	Negatif	Negatif	Gastritis (maag)	(110/80) Normal	- Normal sinus ritme - Normal ECG	
60	L	32	23	22	27.8	1.14	79	190	140	Negatif	Negatif	Kacamata Minus	(120/70) Normal	Normal sinus rhythm.	

No.	Gender	Age	Fungsi Hati		Faal Ginjal			D M		Profil Lipid		Urinalisa		Riwayat Kesehatan	Tensi (mmHg)		ECG
			SGOT L: < 37	SGPT L: < 50	Uremum 12.8 - 42.8	Creatinin L: 0.67 - 1.17	Gluk. P < 100	Koles. T < 200	Trig < 150	Protein Negatif	Glukosa Negatif	Sistolik	Diastolik				
61	L	32	15	16	19.3	0.84	89	179	55	Negatif	Negatif	Negatif	Kacamata Minus	(120/70) Normal		Sinus bradycardia.	
62	L	32	26	29	21.0	0.83	95	162	99	Negatif	Negatif	Negatif	Lain-lain (Alergi)	(120/80) Normal		Normal sinus rhythm	
63	L	33	13	20	30.0	1.00	76	149	40	Negatif	Negatif	Negatif	Kacamata Minus, Lain-lain (Penyakit lainnya)	120	80	Normal Sinus Rhythm	
64	L	33	25	25	19.3	0.80	75	167	125	Negatif	Negatif	Negatif	Gastritis (Maag)	110	80	Normal sinus ritms	
65	L	33	17	18	11.8	0.87	98	170	54	Negatif	Negatif	Negatif	Pernah operasi, Demam berdarah, Typoid, Hernia, Hemoroid	120	70	Normo sinus rhythm Normal ECG	
66	L	33	19	11	21.2	0.91	83	123	65	Negatif	Negatif	Negatif	Tidak Ada	120	80	Dalam batas normal	
67	L	33	16	16	18.4	0.84	87	116	53	Negatif	Negatif	Negatif	Kacamata Minus, Kacamata Sレンダー	110	70	Normal	
68	L	33	20	16	34.1	1.10	93	193	75	Negatif	Negatif	Negatif	Tidak Ada	100	70	Normal ECG	
69	L	33	21	29	15.9	0.99	95	128	124	Negatif	Negatif	Negatif	Pernah opname dan operasi karena patah tulang fibula sinistra	(110/70) Normal		Normal	
70	L	33	17	19	17.8	0.90	97	160	65	Negatif	Negatif	Negatif	-	(90/60) Normal		Normo sinus ritme HR : 63 bpm	
71	L	33	26	31	20.1	1.20	96	172	99	Negatif	Negatif	Negatif	-	(120/80) Normal		normal sinus rhythm, hr 70k/menit, normoksid(normal kecg)	
72	L	33	19	29	14.4	0.93	95	177	107	Negatif	Negatif	Negatif	Tuberculosis (TBC)	(110/80) Normal		SB, HR 48X/MENIT	
73	L	33	20	12	22.3	1.11	82	198	63	Negatif	Negatif	Negatif	Kacamata Minus, Alergi Hirupan	(120/80) Normal		- Normal sinus ritme - Normal ECG	
74	L	33	14	15	23.3	1.02	84	148	57	Negatif	Negatif	Negatif	-	(100/70) Normal		Dalam batas normal	
75	L	33	17	26	38.5	0.78	91	176	82	Negatif	Negatif	Negatif	Asma, Kacamata Minus, Kacamata Sレンダー, Alergi Hirupan, Lain-lain (Alergi), Pernah operasi	(120/80) Normal		Sinus bradycardia.	
76	L	33	23	14	22.0	1.00	94	148	85	Negatif	Negatif	Negatif	Gastritis (maag), Asma, Alergi Makanan, Lain-lain (Alergi)	(100/70) Normal		Sinus bradycardia, 58 x/menit	
77	L	34	17	23	19.8	1.00	96	169	127	Negatif	Negatif	Negatif	Pernah sakit sinus/ palp	110	80	Normo sinus rhythm Normal ECG	
78	L	34	27	49	23.1	0.94	99	178	74	Negatif	Negatif	Negatif	Gastritis (maag), Hipertensi, Pernah operasi, Insomnia	110	80	Normo sinus rhythm Normal ECG	
79	L	34	13	13	22.2	1.04	92	159	54	Negatif	Negatif	Negatif	Tidak Ada	120	80	- Normal sinus ritme - Normal ECG	
80	L	34	14	11	14.0	1.05	94	154	95	Negatif	Negatif	Negatif	Lain-lain (Penyakit lainnya)	(110/70) Normal		Normal ECG	

No.	Gender	Age	Fungsi Hati		Faal Ginjal		D M		Profil Lipid		Urinalisa		Riwayat Kesehatan	Tensi (mmHg)		EKG
			SGOT L: < 37	SGPT L: < 50	Ureum 12.8 - 42.8	Creatinin L: 0.67 - 1.17	Gluk. P < 100	Koles. T < 200	Trig < 150	Protein Negatif	Glikosa Negatif	Sistolik		Diastolik		
81	L	34	17	16	20.6	1.14	79	139	98	Negatif	Negatif	Negatif	-	(120/80)		- Normal sinus ritme - Normal ECG
82	L	34	25	33	19.4	0.87	99	166	84	Negatif	Negatif	Negatif	-	(120/70)		Dalam batas normal
83	L	34	22	24	24.9	1.16	88	130	132	Negatif	Negatif	Negatif	Nyeri punggung/baak pain.	(110/80)		Dalam batas normal
84	L	35	16	14	22.7	1.04	95	189	86	Negatif	Negatif	Negatif	Tidak ada	120	80	Normal sinus ritme HR : 66 bpm
85	L	35	16	26	26.7	0.92	90	162	93	Negatif	Negatif	Negatif	Pernah diopname (Malg 1 Tahun yang lalu), Alergi (Debu), Tibus (4 Tahun yang lalu), Abeerwasir/hemoroid.	110	70	Sinus Ritme; HR 71x/menit; Normalaxis
86	L	35	12	13	12.8	0.80	89	187	53	Negatif	Negatif	Negatif	demam typhoid 2019	110	80	Normo Sinus Rhythm
87	L	35	25	25	24.2	0.80	96	155	52	Negatif	Negatif	Negatif	Tidak Ada	110	70	Normal ECG
88	L	35	22	28	15.2	1.00	98	163	119	Negatif	Negatif	Negatif	-	110	70	NORMAL SINUS RHYTHM
89	L	35	14	11	19.7	1.06	96	191	143	Negatif	Negatif	Negatif	Pernah operasi bisul (abses di pipi kiri & tangan) 2019, ganglion percelangan tangan kiri 2 tahun yang lalu	(110/70)		Normal
90	L	35	17	22	21.8	1.06	93	180	127	Negatif	Negatif	Negatif	Lain-lain (Alergi)	(120/80)		Sinus bradikardi
91	L	35	29	31	17.0	0.99	83	188	69	Negatif	Negatif	Negatif	Alergi debu, Demam berdarah th 2002	(114/71)		Sinus Rhythm, 60x/mnt
92	L	35	17	11	28.7	1.05	85	140	29	Negatif	Negatif	Negatif	Lain-lain (Sistem Penglihatan)	(110/70)		- Normal sinus ritme - Normal ECG
93	L	35	18	29	17.1	1.10	82	177	118	Negatif	Negatif	Negatif	Kacamata Minus	(110/70)		Normal sinus rhythm
94	L	35	19	16	25.0	0.83	95	159	102	Negatif	Negatif	Negatif	Gastritis (maga), Tuberkulosa (TBC), Vertigo (pusing menunduk), Kacamata Minus, Kacamata Silinder, Lain-lain	(110/70)		Normal sinus rhythm
95	L	35	19	10	26.9	1.00	96	174	65	Negatif	Negatif	Negatif	-	(120/80)		Dalam batas normal
96	L	36	15	12	21.4	1.00	96	182	116	Negatif	Negatif	Negatif	Kacamata Minus	110	70	Normal Sinus Rhythm
97	L	36	16	16	19.9	0.87	99	174	102	Negatif	Negatif	Negatif	Diabetes : Jombang 1x/minggu	120	80	Normal ECG
98	L	36	12	14	14.7	0.93	82	170	83	Negatif	Negatif	Negatif	Typhoid : Waktu SD	110	70	Normal
99	L	36	13	12	25.0	0.84	82	129	72	Negatif	Negatif	Negatif	Pernah opname karena DBD.	(130/80)		Normal
100	L	36	18	30	21.7	0.93	97	201	130	Negatif	Negatif	Negatif	Lain-lain (Alergi)	(120/80)		Normal

No.	Gender	Age	Fungsi Hati		Faal Ginjal		D M	Profil Lipid		Urinalisa		Riwayat Kesehatan	Tensi (mmHg)		EKG
			SGOT L: < 37	SGPT L: < 50	Ureum 12.8 - 42.8	Creatinin L: 0.67 - 1.17		Gluk. P < 100	Koles. T < 200	Trig < 150	Protein Negatif		Glukosa Negatif	Sistolik	
101	L	36	20	32	12.8	0.83	90	198	128	Negatif	Negatif	DHF/Demam berdarah	(110/80)		NORMAL
102	L	36	19	9	17.2	0.91	83	185	88	Negatif	Negatif	-	(130/80)		- Normal sinus ritme - Normal ECG
103	L	36	15	14	17.0	0.93	87	171	56	Negatif	Negatif	Haemorrhoid (wasir/ambeben), Kacama Minus, Kacama Slender, Lain-lain (Alergi), Lain-lain ((130/80)		Normal sinus rhythm
104	L	36	18	23	25.7	1.00	87	178	101	Negatif	Negatif	Gastritis (maag); Ya, jarang kambuh, Kacama Minus, Alergi Makanan Seafod, DHF/Demam Berdarah	(120/70)		Normal Sinus Rhythm
105	L	37	23	32	12.8	1.00	88	168	87	Negatif	Negatif	-	120	80	Normal Sinus Rhythm
106	L	37	27	25	19.3	0.77	90	198	95	Negatif	Negatif	Riwayat alergi obat yg mengandung zulfu	(120/80)		Normo Sinus Rhythm
107	L	37	19	19	15.0	0.87	91	176	134	Negatif	Negatif	Gastritis (maag), Tuberculosis (TBC), Lain-lain (Alergi), Pernah operasi	(110/70)		Normal sinus rhythm.
108	L	37	25	60	17.4	0.90	93	170	75	Negatif	Negatif	Kacama minus dan (+) serta gangguan tiroid (gondok hipopitretroid) tahun 2016	(100/60)		Normal sinus rhythm.
109	L	37	16	24	22.2	1.10	89	182	108	Negatif	Negatif	Asma saat kecil	(110/70)		Dalam batas normal
110	L	37	16	22	22.3	0.89	89	178	86	Negatif	Negatif	Post op gigi	(100/70)		- Normal resting ECG - Normal sinus rhythm - Normal axis
111	L	37	26	52	16.0	0.95	78	127	118	Negatif	Negatif	Alergi Makanan	(120/80)		- No ST-T Changes Normal resting ECG
112	L	38	21	40	23.8	1.00	85	150	94	Negatif	Negatif	DHF/Demam berdarah Lain-lain (Sistem Penglihatan)	110	70	Normal ECG
113	L	38	25	30	19.3	0.82	91	179	86	Negatif	Negatif	-	(100/70)		Normal sinus rhythm.
114	L	38	20	26	24.9	1.14	93	182	71	Negatif	Negatif	Kacama Minus, Typoid	(120/70)		Sinus bradycardia.
115	L	38	17	18	17.4	1.00	85	182	114	Negatif	Negatif	-	(96/60)		Normal
116	L	38	18	20	25.6	1.07	82	154	98	Negatif	Negatif	-	(120/80)		Normal ECG
117	L	39	14	17	19.0	0.87	96	182	116	Negatif	Negatif	Kacama Minus	120	80	Normal ECG
118	L	39	15	19	19.5	1.01	92	192	76	Negatif	Negatif	(-)	110	80	NORMAL ECG
119	L	39	15	24	18.4	0.89	82	189	91	Negatif	Negatif	Mengalami cakra kepala	(120/80)		Normal
120	L	39	17	16	21.4	0.93	85	181	115	Negatif	Negatif	DHF/Demam berdarah	(130/80)		Sinus bradycardia.

No.	Gender	Age	Fungsi Hati		Faal Ginjal		D M	Profil Lipid		Urinalisa		Riwayat Kesehatan	Tensi (mmHg)		EKG
			SGOT L: < 37	SGPT L: < 50	Ureum 12.8 - 42.8	Creatinin L: 0.67 - 1.17		Gluk. P < 100	Koles. T < 200	Trig < 150	Protein Negatif		Glukosa Negatif	Sistolik	
121	L	40	16	23	18.3	0.85	93	192	99	Negatif	Negatif	Tidak ada	120	80	Normo sinus rhythm Normal ECG HR : 66 bpm
122	L	40	17	22	26.6	0.94	94	157	117	Negatif	Negatif	-	(120/60)	Normal	Normo sinus rhythm Right axis deviation Other parameters are within normal limits HR : 68 bpm
123	L	40	19	24	19.1	0.94	90	179	103	Negatif	Negatif	TBC (10 tahun yang lalu), Gastritis	(110/70)	Normal	- Normal resting ECG - Normal sinus rhythm - Normal axis - No ST-T Changes Normo sinus ritme HR : 68 bpm
124	L	41	18	16	19.8	0.92	92	152	64	Negatif	Negatif	Tidak ada	110	70	Normo sinus ritme HR : 68 bpm
125	L	41	14	15	23.5	0.76	93	191	102	Negatif	Negatif	Gastritis (masa), Operasi saluran pencernaan, Tuberculosis (TBC), Kacama Mimus	(120/70)	Normal	Normal sinus rhythm
126	L	41	18	18	15.4	1.04	86	188	89	Negatif	Negatif	Nyeri otot dan sendi	(100/70)	Normal	Sinus bradikardia
127	L	41	17	28	19.3	0.80	90	173	81	Negatif	Negatif	-	(120/80)	Normal	Normal Sinus Rhythm
128	L	42	18	27	30.9	0.88	100	168	136	Negatif	Negatif	Kacama (+) Lain-lain (Penyakit lainnya)	120	80	Normal ECG
129	L	42	15	10	19.0	0.90	97	185	96	Negatif	Negatif	Memakai kacama	120	80	Irama sinus 80 x/m, aksis frontal Normal - EKG Normal
130	L	42	16	18	22.4	0.96	91	182	62	Negatif	Negatif	Alergi (Debu).	130	70	Sinus ritme, HR 73x/menit, Normoaxis,
131	L	42	16	22	20.6	0.90	88	158	145	Negatif	Negatif	Tidak Ada	110	80	Normal ECG
132	L	42	27	18	24.0	0.83	82	196	94	Negatif	Negatif	-	110	70	Normal ECG
133	L	42	39	43	17.7	0.94	84	187	73	Negatif	Negatif	Alergi Makanan, Lain-lain (Alergi)	(120/70)	Normal	Normal ECG
134	L	42	21	20	22.1	0.90	88	186	111	Negatif	Negatif	-	Normal	Normal	Normal sinus rhythm
135	L	43	15	17	20.3	1.16	79	138	100	Negatif	Negatif	Stroke	(120/80)	Normal	Dalam batas normal
136	L	44	20	28	19.1	1.01	100	192	147	Negatif	Negatif	Pernah Operasi (Caesar Tahun 2015 e.c Keutuban pecah dini).	120	80	Sinus Ritme, HR 74x/menit, Normoaxis
137	L	45	22	29	21.2	0.83	84	194	128	Negatif	Negatif	Kacama Mimus, Kacama (+)	120	80	Normal ECG
138	L	45	16	18	19.3	0.90	89	163	89	Negatif	Negatif	Kacama Mimus	110	70	Normal Sinus Rhythm
139	L	45	29	44	27.8	0.58	91	170	82	Negatif	Negatif	Gastritis (masa), Kacama (+)	(100/60)	Normal	Normal sinus rhythm
140	L	45	16	19	15.9	0.92	99	177	99	Negatif	Negatif	Cidera kepala, gangguan penglihatan	(110/70)	Normal	Normal

No.	Gender	Age	Fungsi Hati		Faal Ginjal		D M	Profil Lipid		Urinalisa		Riwayat Kesehatan	Tensi (mmHg)		EKG
			SGOT L: < 37	SGPT L: < 50	Ureum 12.8 - 42.8	Creatinin L: 0.67 - 1.17		Gluk. P < 100	Koles. T < 200	TRIG < 150	Protein Negatif		Glukosa Negatif	Sistolik	
141	L	46	18	21	20.5	0.90	88	186	92	Negatif	Negatif	Kacamata (+), Alergi Obat	120	80	Dalam batas normal
142	L	46	28	40	15.0	0.90	79	187	143	Negatif	Negatif	Kacamata plus, Nyeri punggung/lecek panu	100	70	Normal sinus ritmis
143	L	46	18	18	21.0	0.96	101	199	143	Negatif	Negatif	(-)	130	80	Normal ECG
144	L	47	14	19	19.3	0.90	95	168	84	Negatif	Negatif	Kacamata Minus, Kacamata (+)	120	70	Normal Sinus Rhythm
145	L	48	20	27	24.2	0.90	85	139	132	Negatif	Negatif	Dirawat di RS (2015) karena demam hipoid, memakai kacangmala minus : 1.25D ODS	130	90	Normal ECG
146	L	49	18	17	19.0	1.12	93	178	105	Negatif	Negatif	Gastritis (maag), Kacamata (+), Kecelakaan / cidera / trauma /luka parah, DHE/Demam berdarah	100	70	Normal ECG
147	L	49	17	18	19.9	1.15	106	154	64	Negatif	Negatif	Alergi	120	80	Normo sinus rhythm Normal ECG
148	L	50	24	20	19.3	1.03	88	126	79	Negatif	Negatif	Kacamata (+), Lain-lain (Penyakit lainnya)	110	70	Normal
149	L	50	15	16	17.7	0.83	86	152	95	Negatif	Negatif	-	(90/70)		- Normal sinus rime - Normal ECG
150	L	51	13	10	21.5	0.93	102	185	97	Negatif	Negatif	-	110	80	Normal
151	L	51	15	14	17.1	1.00	89	190	80	Negatif	Negatif	Kacamata Minus, Kacamata (+), Kacamata Slender	130	80	Normal Sinus Rhythm
152	L	52	15	13	23.6	1.09	103	148	85	Negatif	Negatif	Pneumonia & TB paru (1992), Pernah operasi hernia (2016)	120	70	Normal
153	L	52	18	12	21.5	0.86	83	170	65	Negatif	Negatif	Tidak ada	100	60	Normo sinus rime HR : 64 bpm
154	L	53	15	16	28.5	1.10	111	186	67	Negatif	Negatif	Haemorrhoid (wasir/ambeben), Kacamata (+), Amandel/tonsilitis, Lain-lain (Sistem Penggigitan)	130	80	Normal
155	L	54	16	13	25.8	1.00	95	186	87	Pos 1 (25 mg/dL) Negatif	Negatif	Kacamata (+), Kacamata Slender	110	70	Dalam batas normal

No.	Gender	Age	Fungsi Hati			Faal Ginjal	DM	Profil Lipid		Urinalisa		Riwayat Kesehatan	Tensi (mmHg)		EKG
			SGOT	SGPT	Ureum			Creatinin	Gluk. P	Koles. T	Trig		Protein	Glukosa	
1	P	24	14	11	13.0	0.70	79	163	67	Negatif	Negatif	Gastritis	(110/70) Normal	Normal	
2	P	25	13	12	27.0	0.74	102	136	83	Negatif	Negatif	Gastritis (mrag)	100 100	70 Normal	
3	P	25	16	15	15.0	0.70	89	172	110	Negatif	Negatif	Haemoroid (wasir/ambeben)	100	60 Normal sinus minus.	
4	P	25	19	18	19.3	0.60	80	193	81	Negatif	Negatif	Gastritis (mrag), Rhinitis Alergik, Cidera tulang belakang, nyeri pinggang, Gangguan tidur, Alergi udara dingin	100	70 Normal sinus minus	
5	P	25	13	12	19.3	0.60	76	143	62	Negatif	Negatif	Gastritis (Mrag), Alergi Konak	120	70 Normal sinus minus.	
6	P	25	20	27	19.3	0.60	98	212	78	Negatif	Negatif	Gastritis (Mrag), Kacamatia minus dan slender, Alergi makanan dan alkohol	110	80 Normal Sinus Rintis.	
7	P	26	19	30	20.5	0.70	119	195	92	Negatif	Negatif	Gastritis (mrag), Haemorroid (wasir/ambeben), Kacamatia Minus, Kacamatia Slender, Infeksi saluran kemih, Pernah	100	70 Dalam batas normal	
8	P	26	16	11	25.6	0.80	78	126	41	Negatif	Negatif	Kacamatia Minus, Pernah operasi	110	70 Normal ECG	
9	P	26	18	19	12.8	0.60	81	146	76	Negatif	Negatif	-	120	80 Normal Sinus Rhythm	
10	P	26	16	11	17.5	0.70	79	192	69	Negatif	Negatif	Pernah optame karena DB, mrag, insomnia	(90/60) Normal	Normal	
11	P	26	14	11	17.1	0.70	78	140	76	Negatif	Negatif	-	(110/80) Normal	Normal Sinus Rhythm	
12	P	26	14	12	14.2	0.63	79	140	73	Negatif	Negatif	Kacamatia Minus, Kacamatia Slender	(100/80) Normal	Dalam batas normal	
13	P	27	14	11	19.6	0.68	98	172	77	Negatif	Negatif	Gastritis (mrag), Kacamatia Minus, Kacamatia Slender, Lamihan (Alergi), Pernah operasi	110	80 Dalam batas normal	
14	P	27	16	10	17.1	0.70	76	171	44	Negatif	Negatif	-	120	80 Normal Sinus Rhythm	
15	P	27	11	12	15.0	0.70	95	168	91	Negatif	Negatif	-	110	70 Normal Sinus Rhythm	
16	P	27	19	16	15.0	0.70	70	192	38	Pos 1 (25 mg/dl) Negatif	Negatif	Vertigo, Kacamatia minus, Low Back Pain, Operasi SC	100	70 Normal sinus minus	
17	P	27	16	16	18.4	0.72	90	181	64	Negatif	Negatif	Tidak ada	100	80 Normal ECG	
18	P	27	16	11	16.2	0.56	75	122	51	Negatif	Negatif	Amandel, mrag, sedang hamil 6 mragu	(100/70) Normal	Sinus arhythmia 75-85 bpm	
19	P	27	17	15	20.2	0.68	89	164	50	Negatif	Negatif	-	(120/80) Normal	Normal sinus rhythm	
20	P	27	20	15	18.3	0.66	83	173	55	Negatif	Negatif	-	(90/60) Normal	Normal sinus ritme HR: 73 bpm	

No.	Gender	Age	Fungsi Hati		Faal Ginjal		D M	Profil Lipid		Urutiasa		Riwayat Kesehatan	Tensi (mmHg)		EKG
			SGOT P < 31	SGPT P < 35	Uremum 12.8 - 42.8	Creatinin P: 0.51 - 0.95		Gluk. P < 100	Koles. T < 200	Tlg < 150	Protein Negatif		Glukosa Negatif	Sistolik	
21	P	27	15	14	24.0	0.53	89	137	41	Negatif	Negatif	Kacamatania Minus, Pernah operasi	(120/80) Normal		- Normal sinus ritme - Normal ECG
22	P	28	20	14	13.9	0.70	75	191	113	Negatif	Negatif	Kacamatania Minus	110	80	Dalam batas normal
23	P	28	19	18	10.0	0.80	101	171	84	Negatif	Negatif	Kacamatania Minus, Kacamatania Slender	110	70	Dalam batas normal
24	P	28	18	10	13.3	0.63	83	194	72	Negatif	Negatif	Kacamatania Minus, Lari-lari (Alergi)	110	80	SR, HR 55/vm, normal ECG
25	P	28	15	32	19.3	0.60	88	178	85	Negatif	Negatif	-	110	80	Normal Sinus Rhythm
26	P	28	21	33	21.4	0.50	92	124	91	Pos 1 (25 mg/dl)	Negatif	Gastritis (Maag), asma, rheumatik, hipertroid	130	80	Normal sinus ritmus
27	P	28	10	9	16.5	0.50	82	150	70	Negatif	Negatif	Pernah operasi Kista, kacamatania minus, maag	(110/70) Normal		Normal
28	P	28	16	12	22.1	0.86	88	193	72	Negatif	Negatif	-	(120/80) Normal		Normal ECG
29	P	28	14	13	13.7	0.70	76	186	127	Negatif	Negatif	Gastritis (maag)	(100/70) Normal		- Normal sinus ritme - Normal ECG
30	P	28	17	19	14.4	0.90	92	197	144	Negatif	Negatif	Gastritis (maag) / Kacamatania Minus, Pernah operasi	(120/70) Normal		Normal sinus rhythm
31	P	28	20	23	19.2	0.70	83	154	106	Negatif	Negatif	Gastritis (maag), Demam typhoid, Haemorrhoid, Vertigo, Kacamatania minus, Infeksi saluran kencing, Nyeri	(90/60) Normal		Normal sinus rhythm
32	P	28	14	9	10.8	0.55	73	136	40	Negatif	Negatif	-	(100/60) Normal		Dalam batas normal
33	P	28	20	11	21.5	0.90	90	183	105	Negatif	Negatif	kacamatania minus	(120/80) Normal		Dalam batas normal
34	P	29	14	13	23.5	0.60	92	187	150	Negatif	Negatif	Kacamatania Minus, Kacamatania Slender, Alergi Makanan	130	80	Dalam batas normal
35	P	29	15	16	24.9	0.80	81	194	57	Negatif	Negatif	-	130	90	Dalam batas normal
36	P	29	15	19	15.9	0.74	107	182	91	Negatif	Negatif	Kacamatania Minus	110	70	SR, HR 60/vm, normal ECG
37	P	29	15	11	22.0	0.65	79	130	40	Negatif	Negatif	Hipertensi, mnyawa SC 2016/2019	100	70	Normal ECG
38	P	29	14	16	12.8	0.70	81	181	36	Negatif	Negatif	-	110	80	Normal Sinus Rhythm
39	P	29	21	16	27.8	0.60	76	176	36	Negatif	Negatif	Pernah operasi	100	70	Normal sinus ritmus
40	P	29	13	11	17.8	0.54	89	178	37	Negatif	Negatif	Alergi: udang, Omburca: Gym, Krimnyawa	110	70	Normal

No.	Gender	Age	Fungsi Hati		Faal Ginjal		DM	Profil Lipid		Urinalisa	Riwayat Kesehatan	Tensi (mmHg)		EKG	
			SGOT P < 31	SGPT P < 35	Uremi 12.8 - 42.8	Creatinin P: 0.51 - 0.95		Gluk. P < 100	Koles. T < 200			Trig. < 150	Protein		Glukosa
41	P	29	17	13	20.5	0.60	92	136	109	Negatif	Negatif	Meng ambien	(100/70)	Normal	EKG dalam batas normal
42	P	29	12	9	17.8	0.66	85	182	90	Negatif	Negatif	Pernah opname karena tricus dan operasi meidihkan (ama)	(100/70)	Normal	Normal
43	P	29	22	22	19.3	0.59	93	184	112	Negatif	Negatif	Pernah opname karena tricus. Riwayat ambien.	(100/60)	Normal	Normal
44	P	29	15	16	21.4	0.71	77	176	61	Negatif	Negatif	Riwayat alergi seafood	(120/70)	Normal	Normo sinus rhythm
45	P	29	16	14	16.9	0.62	92	179	51	Negatif	Negatif	Alergi Makanan	(120/70)	Normal	Normal ECG
46	P	29	27	20	27.5	0.64	88	170	61	Negatif	Negatif	Alergi Makanan	(110/80)	Normal	Normal
47	P	29	14	13	15.9	0.71	98	168	66	Negatif	Negatif	DHF/Demam berdarah	(90/60)	Normal	Normal
48	P	29	18	14	14.4	0.53	79	159	51	Negatif	Negatif	Pernah operasi	(100/70)	Normal	Normal ECG
49	P	29	15	13	15.0	0.68	91	197	80	Negatif	Negatif	Gastritis (mang), Haemorrhoid (vstra/ambien), Kacama (120/70) Slender, Lain-lain (Sistem Penglihatan), Lain-lain (Kulit Alergi)	(100/70)	Normal	Normal sinus rhythm.
50	P	29	29	21	17.0	0.65	80	154	47	Negatif	Negatif	Gastritis (mang), Haemorrhoid (vstra/ambien), Kacama (110/70)	(110/70)	Normal	Normal sinus rhythm
51	P	29	18	22	15.0	0.71	96	171	89	Negatif	Negatif	Tuberculosis (TBC), Kacama Minus, Alergi Makanan, Lain-lain (Alergi), Pernah operasi	(92/70)	Normal	EKG dalam batas normal
52	P	29	22	27	19.5	0.62	84	157	56	Negatif	Negatif	pernah operasi SC	(100/70)	Normal	Dalam batas normal
53	P	29	16	16	15.4	0.62	90	183	93	Negatif	Negatif	Gastritis (mang), asma, gangguan penglihatan, alergi debu, pernah operasi SC & amandel	(110/70)	Normal	Incomplete RBBB
54	P	29	13	10	13.8	0.52	87	179	49	Negatif	Negatif	Post op sinus-polip (2008),	(110/70)	Normal	- NSR 66 bpm, axis N
55	P	29	15	10	22.0	0.60	76	177	50	Negatif	Negatif	Asma	(110/70)	Normal	- Normal Rasting ECG
56	P	29	11	10	18.2	0.68	82	192	113	Negatif	Negatif	Alergi Makanan, Typoid, Pernah operasi	(110/70)	Normal	Dalam batas normal
57	P	29	26	17	17.3	0.70	81	167	36	Negatif	Negatif	Kacama minus	(120/80)	Normal	Sinus Bradicardia 40x/menit
58	P	30	20	10	20.4	0.79	75	196	92	Negatif	Negatif	-	120	Normal	SR, HR 55x/m, normoECG
59	P	30	19	12	21.4	0.60	88	170	41	Negatif	Negatif	-	110	70	Normal Sinus Rhythm
60	P	30	13	24	19.3	0.70	97	144	55	Negatif	Negatif	Pernah operasi	110	80	Normal Sinus Rhythm

No.	Gender	Age	Fungsi Hati		Faal Ginjal		D M	Profil Lipid		Urutalisa		Riwayat Kesehatan	Tensi (mmHg)		ECG
			SGOT P < 31	SGPT P < 35	Uremum 12.8 - 42.8	Creatinin P: 0.51 - 0.95		Gluk. P < 100	Koles. T < 200	Trig. < 150	Protein Negatif		Glukosa Negatif	Sistolik	
61	P	30	15	10	13.8	0.78	94	167	68	Negatif	Negatif	Tidak ada	110	70	SR, HR 58/m, RBBB Incomplete
62	P	30	16	9	14.4	0.71	92	148	63	Negatif	Negatif	Pernah operasi SC, Riwayat amandel, amben, kontrasepsi	(120/70)		Normal
63	P	30	20	13	21.3	0.62	80	191	88	Negatif	Negatif	Riwayat alergi secar tahun 2017	(120/70)		Normo sinus mine
64	P	30	12	10	20.7	0.71	88	162	42	Negatif	Negatif	-	(120/80)		HR . 87 bpm
65	P	30	15	14	28.8	0.58	83	177	61	Negatif	Negatif	Gasitis (maag)	Normal		Normal ECG
66	P	30	12	12	12.8	0.61	89	176	75	Negatif	Negatif	Demam typhoid, Haemorrhoid (wasir/ambeben), Pernah operasi Lain-lain (Tulang, Servik & Otot)	(90/70)		Sinus bradikardi
67	P	30	15	9	22.4	0.67	97	171	51	Negatif	Negatif	Gasitis (maag), Kacamatia Minus, Pernah operasi	(110/70)		Normal sinus rhythm.
68	P	30	19	16	21.0	0.77	92	196	74	Negatif	Negatif	Gasitis (maag) / Asma, Kacamatia Minus, Kacamatia Siker, Infeksi saluran kemih, Alergi Obat, Alergi	(90/60)		Normal sinus rhythm.
69	P	30	15	20	17.0	0.59	89	168	130	Negatif	Negatif	Kacamatia Minus, Kacamatia Siker, Pernah operasi	(100/70)		ECG dalam batas normal
70	P	30	13	9	14.2	0.80	78	158	67	Negatif	Negatif	Gasitis (maag), Vertigo, dan Kacamatia minus	Normal		Normal sinus rhythm.
71	P	30	24	29	25.0	0.70	88	191	74	Negatif	Negatif	Asma, Nyeri punggung/back pain, DHF/Demam berdarah, Pernah operasi (usus halus dan caesar)	(110/70)		Normal sinus mine
72	P	30	14	10	19.8	0.70	78	163	68	Negatif	Negatif		Normal		Within Normal Limit Findings
73	P	30	22	18	18.5	0.70	75	157	59	Negatif	Negatif	Alergi seafood, & debu, operasi amandel (2017)	Normal		Within Normal Limit ECG
74	P	30	13	9	11.6	0.58	65	194	118	Negatif	Negatif	Pernah operasi	Normal		Within Normal Limit ECG
75	P	30	20	22	16.6	0.61	85	168	105	Negatif	Negatif	Gasitis (maag), Kacamatia Minus, Kacamatia Siker, Infeksi saluran kemih, DHF/Demam berdarah, Pernah	(100/60)		Dalam batas normal
76	P	31	17	15	14.4	0.65	91	195	71	Negatif	Negatif	Alergi Makanan	Normal		Dalam batas normal
77	P	31	14	11	21.1	0.70	79	198	50	Negatif	Negatif	Kacamatia Siker	100	80	Dalam batas normal
78	P	31	16	10	22.6	0.61	86	157	52	Negatif	Negatif	Lain-lain (Alergi), Pernah operasi Lain-lain (Penyakit lainnya), Lain-lain (Sistem Cardioaskuler)	100	70	SR, HR 60/m, normo ECG
79	P	31	13	14	22.2	0.68	96	164	65	Negatif	Negatif	Pernah operasi	100	70	Normal ECG
80	P	31	15	18	21.4	0.80	89	176	112	Negatif	Negatif	Kacamatia Minus	120	70	Normal Sinus Rhythm

No.	Gender	Age	Fungsi Hati		Faal Ginjal		DM	Profil Lipid		Urinalisa		Riwayat Kesehatan	Tensi (mmHg)		EKG
			SGOT P < 31	SGPT P < 35	Uremum 12.8 - 42.8	Creatinin P: 0.51 - 0.95		Gluk. P < 100	Koles. T < 200	Trig. < 150	Protein Negatif		Glukosa Negatif	Sistolik	
81	P	31	18	24	17.1	0.70	91	164	101	Negatif	Negatif	-	110	80	Normal Sinus Rhythm
82	P	31	17	10	30.0	0.70	89	164	59	Negatif	Negatif	-	110	80	Normal Sinus Ritmis
83	P	31	17	20	15.0	0.60	106	155	67	Negatif	Negatif	Kacumata minus	105	70	Normal sinus sinis
84	P	31	18	17	29.9	0.60	97	150	58	Negatif	Negatif	Tidak ada	110	70	Normal
85	P	31	13	11	19.3	0.60	96	181	75	Negatif	Negatif	Gastritis (maag) / Haemorrhoid (wasir/ambeien), Kacumata Minus	(100/70)		Normal sinus rhythm.
86	P	31	21	27	24.0	0.70	81	160	76	Negatif	Negatif	Gangguan tiroid (gondok, hipu, hipertiroid)	(100/60)		Normal sinus rhythm.
87	P	31	15	21	19.5	0.80	92	194	123	Negatif	Negatif	Gastritis (maag), Kacumata minus dan slender, Kista, dan pernah operasi hipertrofi post (myometri kista)	(100/60)		Normal sinus rhythm.
88	P	31	24	27	15.7	0.67	90	166	86	Negatif	Negatif	Gangguan penglihatan (minus), Pernah dioperasi	(100/90)		Normal ECG
89	P	31	13	10	13.8	0.67	90	167	115	Negatif	Negatif	Gastritis (maag), Demam typhoid, Asma, Kacumata Minus, Kacumata Slender, Alergi Makanan, Typhoid, Pernah	(100/80)		Dalam batas normal
90	P	32	12	11	15.6	0.77	81	171	50	Negatif	Negatif	Gastritis (maag), Kacumata Minus	110	70	Normal ECG
91	P	32	14	11	21.4	0.70	90	193	49	Pos 1 (25 mg/dl)	Negatif	Pemah operasi	110	70	Normal sinus sinis
92	P	32	15	13	21.2	0.60	78	166	71	Negatif	Negatif	Pemah oprane karena operasi SC dan patah tulang DBD, fibus, SLE, migra.	(100/70)		sinus bradycardia.
93	P	32	16	11	22.1	0.70	80	147	43	Negatif	Negatif	Pemah operasi kista	(90/60)		Sinus aritmia (varian normal)
94	P	32	27	11	16.8	0.55	85	154	45	Negatif	Negatif	Gastritis (maag)	(100/70)		HR: 57 bpm
95	P	32	16	13	15.0	0.65	88	181	43	Negatif	Negatif	Gastritis (maag), Kacumata Slender, Lain biri (Alergi)	(100/70)		- Normal sinus ritme - Normal ECG
96	P	32	19	19	20.9	0.73	92	150	97	Negatif	Negatif	Gastritis, Post op SC (2012), Alergi debu dan dengan Pemah operasi	(110/80)		Sinus bradycardia.
97	P	33	14	11	17.1	0.60	83	184	84	Negatif	Negatif	Pemah operasi	110	80	- NSR 73 bpm, axis N - Normal resting ECG
98	P	33	14	14	15.4	0.61	90	196	42	Negatif	Negatif	Alergi debu	120	70	Normal Sinus Rhythm
99	P	33	17	22	10.9	0.50	87	165	88	Negatif	Negatif	Kacumata Minus, maag	(110/70)		NORMAL ECG
100	P	33	17	15	30.2	0.80	84	176	56	Negatif	Negatif	-	(110/70)		Normal

No.	Gender	Age	Fungsi Hati		Fasal Ginjal		DM	Profil Lipid		Urinalisa		Riwayat Kesehatan	Tensi (mmHg)		EKG
			SGOT P < 31	SGPT P < 35	Uremum 12,8-42,8	Creatinin P: 0,51 - 0,95		Gluk. P < 100	Koles. T < 200	Trig. < 150	Protein Negatif		Glukosa Negatif	Sistolik	
101	P	33	16	13	14,5	0,76	88	155	94	Negatif	Negatif	Riwayat GERD (+)	(120/70)	Normal	SR, HR, 74x/m
102	P	33	24	25	15,7	0,57	87	194	133	Negatif	Negatif	Alergi dingin, maag	(102/66)	Normal	Sinus Rhythm HR : 80x/m
103	P	33	22	21	17,0	0,77	71	156	42	Negatif	Negatif	Typhoid	(110/70)	Normal	Normal sinus rhythm
104	P	33	21	20	13,9	0,70	84	172	130	Negatif	Negatif	Gastritis (maag), Demam typhoid, Anemia, Vertigo, Kacamatia minus, Nyeri punggung belakang, Kacamatia minus, Nyeri pinggang belakang.	(100/60)	Normal	Normal sinus rhythm
105	P	34	15	10	17,0	0,80	94	152	82	Negatif	Negatif	Riwayat : Gastritis, Kelelahan : olahraga 6 kali/minggu	110	Normal	Normal Sinus Rhythm
106	P	34	21	23	20,0	0,80	87	156	46	Negatif	Negatif	Riwayat : Gangguan penglihatan (ODS : -6,50), iritasi saluran kencing tahun 2015, Kelelahan : Olahraga 3	100	Normal	Normal Sinus Rhythm
107	P	34	16	10	20,9	0,57	89	178	34	Negatif	Negatif	Pernah operasi	110	Normal	Normal
108	P	34	16	10	23,5	0,60	88	199	59	Negatif	Negatif	Kacamatia Minus, Lain-lain (Sistem Penglihatan)	100	Normal	Normal Sinus Rhythm
109	P	34	12	9	24,0	0,64	72	113	48	Negatif	Negatif	Pernah operasi SC	(100/60)	Normal	Sinus arrhythmia 75-90 bpm
110	P	34	15	9	13,4	0,68	91	199	57	Negatif	Negatif	Lain-lain (Alergi)	(90/60)	Normal	Normal
111	P	34	13	11	17,1	0,74	83	141	45	Negatif	Negatif	Gastritis (maag), Kacamatia Minus, Kacamatia Slender, DHE/Demam berdarah, Typhoid, Pernah operasi	(110/70)	Normal	Normal sinus rhythm
112	P	34	15	9	26,0	0,85	84	172	61	Negatif	Negatif	Gastritis (maag), Vertigo (pusing memutar), Kacamatia Minus, Kacamatia Slender, Alergi Obat, Lain-lain (Alergi)	(110/80)	Normal	Normal sinus rhythm
113	P	34	12	9	19,0	0,60	92	183	72	Negatif	Negatif	Gastritis (maag), Alergi Makanan, Lain-lain (Alergi), Lain-lain (Periyokid bintika)	(102/70)	Normal	EKG dalam batas normal
114	P	35	26	21	14,0	0,60	82	179	67	Negatif	Negatif	Riwayat : Gangguan penglihatan (ODS : -5,50), pernah di operasi SC tahun 2009 dan 2012, Kelelahan : Olahraga 4	110	Normal	Normal Sinus Rhythm
115	P	35	30	30	12,0	0,70	97	179	105	Negatif	Negatif	Riwayat : Infeksi saluran kencing (1 kali), riwayat alergi (dermatitis), Kelelahan : Olahraga 3 kali/minggu	110	Normal	Normal Sinus Rhythm
116	P	35	17	14	17,1	0,60	80	115	76	Negatif	Negatif	Haemorrhoid (wasir/ambein), Kacamatia Minus, Gangguan tirai gondok, hipohipertrikoid, Alergi, Kacamatia Minus	100	Normal	Dalam batas normal
117	P	35	11	13	13,5	0,80	78	179	146	Negatif	Negatif		100	Normal	Dalam batas normal
118	P	35	15	12	16,2	0,64	86	161	88	Negatif	Negatif	Pernah operasi SC, Maag, demam berdarah, tipus.	(100/70)	Normal	Normal sinus rhythm HR : 76 bpm
119	P	35	17	15	22,3	0,77	83	180	75	Negatif	Negatif	Typhus, demam berdarah	(120/60)	Normal	Normal sinus ritme HR : 60 bpm
120	P	35	21	20	14,1	0,71	88	165	67	Negatif	Negatif		(110/80)	Normal	Normal

No.	Gender	Age	Fungsi Hati		Faal Ginjal		DM Glik. P < 100 Diagnosis DM ≥ 126	Profil lipid		Urinalisa		Riwayat Kesehatan	Tensi (mmHg)		EKG
			SGOT P < 31	SGPT P < 35	Uremi 12.8-42.8	Creatinin P: 0.51 - 0.95		Koles. T < 200	Trig. < 150	Protein Negatif	Glusosa Negatif		Sistolik	Diastolik	
121	P	35	12	20	27.8	0.45	91	142	64	Negatif	Negatif	Pernah operasi	(110/70) Normal		Normal sinus rhythm
122	P	35	15	11	23.0	0.88	81	187	64	Negatif	Negatif	Gastritis (maga), Asma, Kacamaa Seder, Lain-lain (Alergi), Lain-lain (Penyakit hanya)	(120/80) Normal		Normal sinus rhythm
123	P	35	17	14	19.2	0.67	82	144	87	Negatif	Negatif	Asma, gangguan penglihatan	(90/60) Normal		Dalam batas normal
124	P	35	16	12	16.9	0.62	69	163	45	Negatif	Negatif	Gastritis (maga), Vertigo (pusing memutar), Typoid, Lain-lain (Penyakit hanya)	(90/60) Normal		Normal ECG
125	P	36	16	19	17.6	0.69	89	189	60	Negatif	Negatif	Alergi: dingin, Apendektomi 7 tahun yang lalu	120	70	Normal ECG
126	P	36	20	12	21.3	0.67	86	154	89	Negatif	Negatif	Tidak ada	120	70	Normal
127	P	36	16	11	12.8	0.69	90	163	47	Negatif	Negatif	Gastritis (maga)	(90/60) Normal		Normal sinus rhythm
128	P	37	15	10	21.8	0.73	88	151	59	Negatif	Negatif	Gastritis (maga), Haemorrhoid (wasir/ambeben), Lain-lain (Alergi), Pernah operasi	110	70	Dalam batas normal
129	P	37	15	17	18.6	0.55	83	183	36	Negatif	Negatif	Alergi: Alkohol	100	70	Normal ECG
130	P	37	19	17	18.0	0.78	77	152	64	Negatif	Negatif	Apendektomi (2013)	100	70	Normal ECG
131	P	38	12	11	21.0	0.60	93	179	75	Negatif	Negatif	-	100	60	Dalam batas normal
132	P	38	15	14	13.4	0.60	89	187	124	Negatif	Negatif	Kacamaa Minus, Kacamaa Seder, Alergi Obat, Pernah operasi	100	70	Dalam batas normal
133	P	38	22	36	15.0	0.80	97	156	120	Negatif	Negatif	Asma, Kacamaa Minus, Alergi Hujan, Pernah operasi	110	70	Normal Sinus Rhythm
134	P	38	17	16	17.1	0.71	70	147	71	Negatif	Negatif	Gastritis (maga), Haemorrhoid (wasir/ambeben), Asma, Kacamaa Minus, Ammelkloronitis	(110/70) Normal		Normal sinus rhythm
135	P	38	14	11	10.7	0.57	87	167	93	Negatif	Negatif	Lain-lain (Alergi), DHE/Demam berdarah	(100/60) Normal		Normal sinus rhythm
136	P	38	15	13	19.9	0.70	83	195	96	Negatif	Negatif	-	(100/60) Normal		Normal sinus rhythm
137	P	38	14	15	11.1	0.80	90	191	136	Negatif	Negatif	Alergi udang & debu, Gastritis	(90/60) Normal		Within Normal Limit Findings
138	P	38	22	19	20.2	0.74	82	186	101	Negatif	Negatif	-	(110/70) Normal		Within Normal Limit ECG
139	P	39	17	11	14.6	0.65	77	142	52	Negatif	Negatif	Tidak ada	110	80	- NSR 80 bpm - Normal resting ECG Normal
140	P	39	20	9	18.7	0.75	78	158	38	Negatif	Negatif	Alergi Makanan	(120/80) Normal		- Normal sinus ritme - Normal ECG

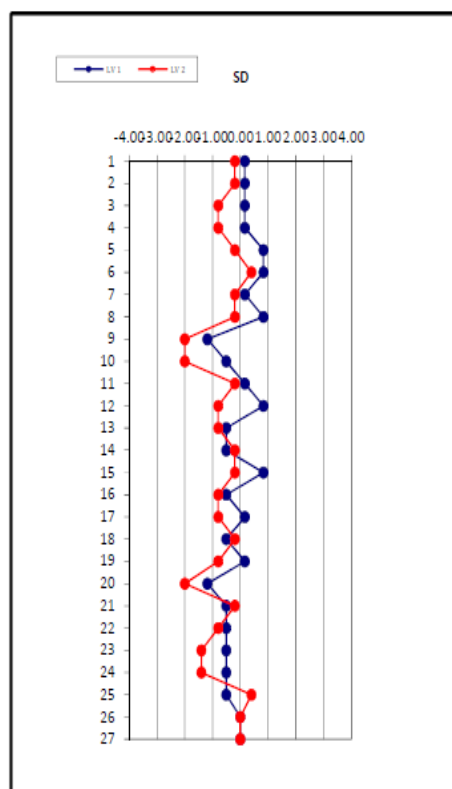
No.	Gender	Age	Fungsi Hati		Faal Ginjal			D M	Profil Lipid			Urinalisa		Riwayat Kesehatan	Tensi (mmHg)		EKG
			SGOT P < 31	SGPT P < 35	Uremum 12.8 - 42.8	Creatinin P: 0.51 - 0.95	Gluk. P < 100 Diagnosis DM ≥ 126		Koles. T < 200	Trig. < 150	Protein Negatif	Glukosa Negatif	Sistolik		Diastolik		
141	P	40	17	15	19.3	0.70	88	167	63	Negatif	Negatif	-	110	80	Normal Sinus Rhythm		
142	P	41	14	12	24.5	0.67	91	164	52	Negatif	Negatif	Lain-lain (Alergi), Pernah operasi, Lain-lain (Penyakit lainnya)	110	70	Normal ECG		
143	P	41	11	14	20.7	0.55	79	167	69	Negatif	Negatif	Kacamata Minus	120	80	Normal sinus rhythm		
144	P	41	14	10	17.1	0.70	91	181	59	Negatif	Negatif	Pemah operasi	120	80	Normal Sinus Rhythm		
145	P	41	22	22	19.3	0.70	95	188	69	Negatif	Negatif	Kacamata minus simble, Alergi makanan	110	80	Normal Sinus Rims		
146	P	41	13	12	36.4	0.45	93	189	40	Negatif	Negatif	Kacamata (+)	Normal	Normal sinus rhythm.			
147	P	41	16	13	34.2	0.74	86	164	89	Negatif	Negatif	Gastritis (maje), Kacamata Minus	(130/70)	Normal	Normal sinus rhythm.		
148	P	41	16	13	19.4	0.74	96	141	38	Negatif	Negatif	Haemorrhoid (wasir/ambeien), Kacamata Minus	(100/70)	Normal	Normal		
149	P	42	20	12	18.0	0.70	93	180	129	Negatif	Negatif	Riwayat : Gangguan pendengaran, gangguan penglihatan (ODS : 2.00, cvl : 2.00), gangguan alat reproduksi	110	70	Normal Sinus Rhythm		
150	P	42	21	20	19.3	0.70	74	192	100	Negatif	Negatif	-	120	80	Normal Sinus Rhythm		
151	P	42	17	24	21.4	0.70	104	197	144	Negatif	Negatif	Pemah operasi	120	80	Normal Sinus Rhythm		
152	P	43	19	11	13.1	0.80	87	192	82	Negatif	Negatif	-	110	70	Normal Sinus Rhythm		
153	P	43	13	12	15.0	0.60	82	182	66	Pos 1 (25 mg/dl)	Negatif	Kacamata minus, Riwayat UHPD	120	80	Normal sinus trims		
154	P	43	19	19	38.5	0.70	87	167	40	Negatif	Negatif	Gastritis (maje), Demam tyoid, Mengalami cedera kepala, Kacamata Minus	(110/70)	Normal	Normal sinus rhythm.		
155	P	43	29	17	17.1	0.67	85	173	43	Negatif	Negatif	Haemorrhoid (wasir/ambeien), Hipertensi, Kacamata (+), Lain-lain (Penyakit daerah tropis)	(120/70)	Normal	Normal sinus rhythm.		
156	P	44	20	20	16.6	0.85	88	164	41	Negatif	Negatif	Kacamata (+)	110	70	Normal ECG		
157	P	44	26	40	19.9	0.68	75	192	60	Negatif	Negatif	Gastritis (maje), Kacamata Minus	(100/60)	Normal	Normal sinus rhythm.		
158	P	45	18	16	15.0	0.60	93	186	98	Negatif	Negatif	Kacamata (+), Pemah operasi	100	80	Normal Sinus Rhythm		
159	P	45	22	14	10.5	0.53	94	198	90	Negatif	Negatif	Kacamata Minus	(110/70)	Normal	Normal		
160	P	46	16	10	16.0	0.51	94	172	67	Negatif	Negatif	Lain-lain (Alergi), Pemah operasi, Lain-lain (Penyakit lainnya)	130	90	NORMAL		

	Gender	Age	Fungsi Hati		Faal Ginjal		DM	Profil lipid		Urnalisa		Kwayerat	Tensi (mmHg)	EKG
			SGOT P < 31	SGPT P < 35	Ureum 12.8 - 42.8	Creatinin P: 0.51 - 0.95		GLUK.P < 300	Koles. T < 200	TiG < 250	Protein Negatif			
161	P	47	17	25	15.0	0.80	90	166	55	Negatif	Negatif	Kacaramula Minus, Kacaramula (+) Lain-lain	110/70	Normal Sinus Rhythm
162	P	47	17	25	15.0	0.80	90	166	55	Negatif	Negatif	Kacaramula Minus, Kacaramula (+) Lain-lain (Tulang Sendi & Gigi)	110/70	Normal Sinus Rhythm
163	P	48	23	13	22.4	0.98	78	198	43	Negatif	Negatif	Kacaramula (+), Pernah operasi	120	Normal sinus rhythm
164	P	48	14	13	15.0	0.70	84	177	65	Negatif	Negatif	Kacaramula (+) Lain-lain (Tulang Sendi & Gigi)	110	Normal Sinus Rhythm
165	P	48	16	18	21.8	0.70	95	175	100	Negatif	Negatif	Alergi obat, spondylosis sarta	120	Normal ECG
166	P	49	18	23	21.4	0.80	97	185	71	Negatif	Negatif	-	120	Normal Sinus Rhythm
167	P	49	17	21	15.0	0.60	81	174	84	Negatif	Negatif	Lain-lain (Alergi), Pernah operasi	110	Normal Sinus Rhythm
168	P	50	17	15	15.0	0.80	95	168	74	Negatif	Negatif	Kacaramula Minus, Kacaramula Sierder	120	- Sinus Rhythm - Incomplete RBBB pattern
169	P	54	18	15	24.6	0.90	84	199	88	Negatif	Negatif	Patah tulang, Pernah operasi	130	Dalam batas normal

LAMPIRAN 4. Pemantapan Mutu Bahan Kontrol ALT Bulan Maret 2020

TEST NAME	SGPT	BIORAD LEVEL 1			BIORAD LEVEL 2			TEa	16.0
		No.LOT 26461							
REAGENT	ABBOT	No.LOT 26461							
METHOD	IFCC WITHOUT P5P	-3S	MEAN	+3S	-3S	MEAN	+3S		
INSTRUMENT	ALINITY	24.3	28.76	33.2	93.3	98.3	103.3	TE (Lev 1)	12.80
CONTROL LIMIT	Target Value	29.48			100.6			TE (Lev 2)	5.65
	Bias / (%)	0.72		2.44	2.27		2.26	UNIT	U/L
	SD / CV (%)	1.49		5.18	1.67		1.70		
	Sigma	2.62			8.09				
QC RULE	1-3s/2of3-2s/R4s/3-1s/6x N=6								

NO	TGL	LV 1	LV 2	Flag
1	2 Maret 20	29	98	
2	3 Maret 20	29	98	
3	4 Maret 20	29	97	
4	5 Maret 20	29	97	
5	6 Maret 20	30	98	
6	7 Maret 20	30	99	
7	9 Maret 20	29	98	
8	10 Maret 20	30	98	
9	11 Maret 20	27	95	
10	12 Maret 20	28	95	
11	13 Maret 20	29	98	
12	14 Maret 20	30	97	
13	16 Maret 20	28	97	
14	17 Maret 20	28	98	
15	18 Maret 20	30	98	
16	19 Maret 20	28	97	
17	20 Maret 20	29	97	
18	21 Maret 20	28	98	
19	23 Maret 20	29	97	
20	24 Maret 20	27	95	
21	26 Maret 20	28	98	
22	27 Maret 20	28	97	
23	28 Maret 20	28	96	
24	30 Maret 20	28	96	
25	31 Maret 20	28	99	

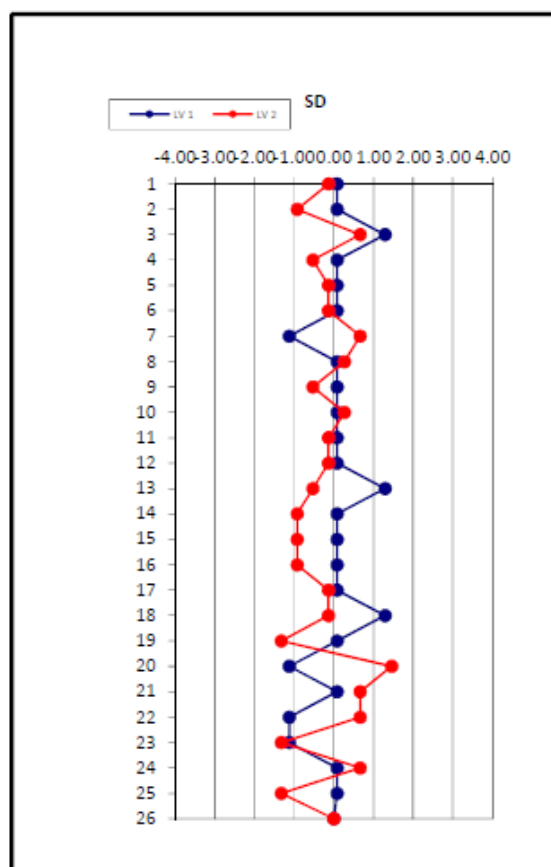


MEAN	28.64	97.24
SD	0.91	1.13
CV %	3.17	1.16
Bias	0.84	3.36
Bias (%)	2.85	3.34
% TE	9.19	5.66
Sigma	4.15	10.91

LAMPIRAN 5. Pemantapan Mutu Bahan Kontrol AST Bulan Februari 2020

TEST NAME	SGOT	BIORAD LEVEL 1			BIORAD LEVEL 2				
REAGENT	ABBOT	No.LOT 26461			No.LOT 26462				
METHOD	IFCC WITHOUT P5P	-3S	MEAN	+3S	-3S	MEAN	+3S	Tea (%)	15.2
INSTRUMENT	ALINITY	33.4	35.9	38.4	172.8	180.3	187.9	TE (Lev 1)	11.46
CONTROL LIMIT	Target Value	38.6			194.1			TE (Lev 2)	9.89
	Bias / (%)	2.64		6.84	13.77		7.09	UNIT	U/L
	SD / CV (%)	0.83		2.31	2.52		1.40		
	Sigma	3.62			5.80				
QC RULE	1-3s/2of3-2s/R4s/3-1s/6x N=6								

NO	TGL	LV 1	LV 2	Flag
1	1 Feb 20	36	180	
2	3 Feb 20	36	178	
3	4 Feb 20	37	182	
4	5 Feb 20	36	179	
5	6 Feb 20	36	180	
6	7 Feb 20	36	180	
7	8 Feb 20	35	182	
8	10 Feb 20	36	181	
9	11 Feb 20	36	179	
10	12 Feb 20	36	181	
11	13 Feb 20	36	180	
12	14 Feb 20	36	180	
13	15 Feb 20	37	179	
14	17 Feb 20	36	178	
15	18 Feb 20	36	178	
16	19 Feb 20	36	178	
17	20 Feb 20	36	180	
18	21 Feb 20	37	180	
19	22 Feb 20	36	177	
20	24 Feb 20	35	184	
21	25 Feb 20	36	182	
22	26 Feb 20	35	182	
23	27 Feb 20	35	177	
24	28 Feb 20	36	182	
25	29 Feb 20	36	177	



MEAN	35.96	179.84
SD	0.54	1.86
CV %	1.50	1.04
Bias	2.61	14.26
Bias (%)	6.77	7.35
% TE	9.76	9.42
Sigma	5.63	7.58

LAMPIRAN 6. Kit Insert

Alinity c

Alanine Aminotransferase Reagent Kit



en

ALT

07P98

G71193R04

B7P980

Read Highlighted Changes: Revised February 2018.

REF 07P9820

Instructions must be carefully followed. Reliability of assay results cannot be guaranteed if there are any deviations from these instructions.

NAME

Alinity c Alanine Aminotransferase Reagent Kit (also referred to as ALT)

INTENDED USE

The Alinity c Alanine Aminotransferase assay is used for the quantitation of alanine aminotransferase in human serum or plasma on the Alinity c analyzer.

SUMMARY AND EXPLANATION OF THE TEST

Alanine Aminotransferase (ALT), also referred to as glutamate pyruvate transaminase (GPT), is an enzyme involved in amino acid metabolism. It is found in many tissues, but the highest levels are found in liver and kidney tissues. Tissue destruction leads to the release of the intracellular enzyme into the circulating blood. Markedly elevated serum ALT levels may be found in a variety of diseases which involve the liver, such as hepatitis, mononucleosis, and cirrhosis. These very high levels of ALT are not usually observed in other disease processes, e.g., myocardial infarction; thus, ALT is regarded as a reasonably specific indicator of liver disease.

PRINCIPLES OF THE PROCEDURE

ALT present in the sample catalyzes the transfer of the amino group from L-alanine to α -ketoglutarate, forming pyruvate and L-glutamate. Pyruvate in the presence of NADH and lactate dehydrogenase (LD) is reduced to L-lactate. In this reaction NADH is oxidized to NAD. The reaction is monitored by measuring the rate of decrease in absorbance at 340 nm due to the oxidation of NADH to NAD.

Methodology: Enzymatic: NADH (without P-5'-P)

For additional information on system and assay technology, refer to the Alinity c-series Operations Manual, Section 3.

REAGENTS**Kit Contents**

Alinity c Alanine Aminotransferase Reagent Kit 07P98

Volumes (mL) listed in the table below indicate the volume per cartridge.

REF	07P9820
Tests per cartridge	360
Number of cartridges per kit	10
Tests per kit	3600
R1	68.1 mL
R2	21.0 mL
R1 Active ingredients: β -NADH (0.16 mg/mL), Lactate dehydrogenase (2.57 U/mL), L-Alanine (392 mmol/L).	
R2 Active ingredients: α -Ketoglutaric acid (77 mmol/L), L-Alanine (1000 mmol/L).	

Warnings and Precautions

- **IVD**
- For *In Vitro* Diagnostic Use
- **Rx ONLY**

Safety Precautions

CAUTION: This product requires the handling of human specimens. It is recommended that all human-sourced materials be considered potentially infectious and handled in accordance with the OSHA Standard on Bloodborne Pathogens. Biosafety Level 2 or other appropriate biosafety practices should be used for materials that contain or are suspected of containing infectious agents.¹⁻⁴

The following warnings and precautions apply to R2:	
Contains tris hydroxymethyl aminomethane.	
H316	Causes mild skin irritation.
Response	
P332+P313	If skin irritation occurs: Get medical advice / attention.

* Not applicable where regulation EU 1272/2008 (CLP) or OSHA Hazard Communication 29CFR 1910.1200 (HCS) 2012 have been implemented.

Safety Data Sheets are available at www.abbottdiagnostics.com or contact your local representative.

For a detailed discussion of safety precautions during system operation, refer to the Alinity c-series Operations Manual, Section 8.

Reagent Handling

- Upon receipt, place reagent cartridges in an upright position for 1 hour before use to allow bubbles that may have formed to dissipate.
- If a reagent cartridge is dropped, place in an upright position for 1 hour before use to allow bubbles that may have formed to dissipate.
- Reagents are susceptible to the formation of foam and bubbles. Bubbles may interfere with the detection of the reagent level in the cartridge and cause insufficient reagent aspiration that may adversely affect results.

For a detailed discussion of reagent handling precautions during system operation, refer to the Alinity c-series Operations Manual, Section 7.

Reagent Storage

	Storage Temperature	Maximum Storage Time	Additional Storage Instructions
Unopened	2-8°C	Until expiration date	Store in upright position.
Onboard	System Temperature	27 days	
Opened	2-8°C	Until expiration date	Store in upright position. Do not reuse original reagent caps or replacement caps due to the risk of contamination and the potential to compromise reagent performance.

Reagents may be stored on or off the system. If removed from the system, store reagents with new replacement caps in an upright position at 2 to 8°C. For reagents stored off the system, it is recommended that they be stored in their original trays or boxes to ensure they remain upright.

For information on unloading reagents, refer to the Alinity ci-series Operations Manual, Section 5.

Indications of Reagent Deterioration

Deterioration of the reagents may be indicated when a calibration error occurs or a control value is out of the specified range. Associated test results are invalid, and samples must be retested. Assay recalibration may be necessary.

For troubleshooting information, refer to the Alinity ci-series Operations Manual, Section 10.

INSTRUMENT PROCEDURE

The Alinity c Alanine Aminotransferase assay file must be installed on the Alinity c analyzer prior to performing the assay.

For detailed information on assay file installation and viewing and editing assay parameters, refer to the Alinity ci-series Operations Manual, Section 2.

For information on printing assay parameters, refer to the Alinity ci-series Operations Manual, Section 5.

For a detailed description of system procedures, refer to the Alinity ci-series Operations Manual.

SPECIMEN COLLECTION AND PREPARATION FOR ANALYSIS

Specimen Types

The specimen types listed below were verified for use with this assay. Other specimen types, collection tube types, and anticoagulants have not been verified with this assay.

Specimen Types	Collection Tubes	Special Conditions
Serum	Serum tubes (with or without gel barriers)	
Plasma	Collection tubes Acceptable anticoagulants are: Lithium heparin (with or without gel barrier) Sodium heparin EDTA	Do not use ammonium heparin. ⁵

Hemolysis in serum or plasma can increase test results.

CAUTION: Erythrocytes contain approximately 3 to 5 times more ALT than does serum.⁶

- The instrument does not provide the capability to verify specimen types. It is the responsibility of the operator to verify that the correct specimen types are used in the assay.

Specimen Conditions

- For accurate results, serum and plasma specimens should be free of fibrin, red blood cells, and other particulate matter. Serum specimens from patients receiving anticoagulant or thrombolytic therapy may contain fibrin due to incomplete clot formation.
- For accurate results, plasma specimens should be free of platelets and other particulate matter. Ensure centrifugation is adequate to remove platelets.
- To prevent cross contamination, use of disposable pipettes or pipette tips is recommended.

Preparation for Analysis

- Follow the tube manufacturer's processing instructions for collection tubes. Gravity separation is not sufficient for specimen preparation.
- Specimens should be free of bubbles. Remove bubbles with an applicator stick before analysis. Use a new applicator stick for each specimen to prevent cross-contamination.

To ensure consistency in results, recentrifuge specimens prior to testing if

- they contain fibrin, red blood cells, or other particulate matter.

NOTE: If fibrin, red blood cells, or other particulate matter are observed, mix by low speed vortex or by inverting 10 times prior to recentrifugation.

Specimen Storage

Numerous publications have defined storage conditions for ALT.⁹⁻¹⁵ Examples are shown below.

Specimen Type	Temperature	Maximum Storage Time	Special Instructions
Serum/ Plasma	30°C	3 days ¹⁰	Remove serum or plasma from the clot, red blood cells, or separator gel.
	2 to 8°C	7 days ¹⁰	
	-40°C	60 days ¹⁵	

It is recommended that specimens be assayed on the day of collection.^{16, 17}

When samples were stored at -20°C for 8 days, an 11% reduction in ALT activity was observed; a 20% reduction in ALT activity was observed when specimens were stored at -20°C for 1 month.¹⁸

Avoid multiple freeze/thaw cycles.

Stored specimens must be inspected for particulates. If present, mix with a low speed vortex or by inversion and centrifuge the specimen to remove particulates prior to testing.

Specimen Shipping

Package and label specimens in compliance with applicable state, federal, and international regulations covering the transport of clinical specimens and infectious substances.

PROCEDURE

Materials Provided

07P98 Alinity c Alanine Aminotransferase Reagent Kit

Materials Required but not Provided

- Alinity c Alanine Aminotransferase assay file
- Commercially available controls containing alanine aminotransferase
- Saline (0.85% to 0.90% NaCl) for specimen dilution

For information on materials required for operation of the instrument, refer to the Alinity ci-series Operations Manual, Section 1.

For information on materials required for maintenance procedures, refer to the Alinity ci-series Operations Manual, Section 9.

Assay Procedure

For a detailed description of how to run an assay, refer to the Alinity ci-series Operations Manual, Section 5.

- If using primary or aliquot tubes, refer to the Alinity ci-series Operations Manual, Section 4 to ensure sufficient specimen is present.
- To minimize the effects of evaporation, verify adequate sample cup volume is present prior to running the test.
- Minimum sample volume requirements:
 - Sample volume for single test: 5.3 µL.

NOTE: This amount does not include the dead volume plus the additional over-aspiration volume. For total sample volume requirements, refer to the Alinity ci-series Operations Manual, Section 4.
- Refer to the commercially available control material package insert for preparation and usage.
- For general operating procedures, refer to the Alinity ci-series Operations Manual, Section 5.
- For optimal performance, it is important to perform routine maintenance as described in the Alinity ci-series Operations Manual, Section 9. Perform maintenance more frequently when required by laboratory procedures.

Sample Dilution Procedures

Samples with an alanine aminotransferase value exceeding 3899 U/L are flagged with the code "> 3899 U/L" and may be diluted with either the Automated Dilution Protocol or the Manual Dilution Procedure.

Automated Dilution Protocol

The system performs a 1:5 dilution of the sample and automatically calculates the concentration by multiplying the result by the dilution factor.

Manual Dilution Procedure

Dilute the sample with saline (0.85% to 0.90% NaCl).

The operator must enter the dilution factor in the Specimen or Control tab of the Create Order screen. The system will use this dilution factor to automatically calculate the concentration of the sample and report the result.

If the operator does not enter the dilution factor, the result must be manually multiplied by the appropriate dilution factor before reporting the result. If a diluted sample result is less than the lower value of the measuring interval of 5 U/L, do not report the result. Rerun using an appropriate dilution.

For detailed information on ordering dilutions, refer to the Alinity ci-series Operations Manual, Section 5.

Calibration

For instructions on performing a calibration, refer to the Alinity ci-series Operations Manual, Section 5.

Calibration is stable for approximately 27 days (648 hours), but is required with each change in reagent lot. Verify calibration with at least 2 levels of controls according to the established quality control requirements for your laboratory. If control results fall outside acceptable ranges, recalibration may be necessary.

This assay may require recalibration after maintenance to critical parts or subsystems or after service procedures have been performed.

Quality Control Procedures

As appropriate, refer to your laboratory standard operating procedure(s) and/or quality assurance plan for additional quality control requirements and potential corrective actions.

- Two levels of controls (normal and abnormal) are to be run every 24 hours.
- If more frequent control monitoring is required, follow the established quality control procedures for your laboratory.
- If quality control results do not meet the acceptance criteria defined by your laboratory, sample results may be suspect. Follow the established quality control procedures for your laboratory. Recalibration may be necessary. For troubleshooting information, refer to the Alinity ci-series Operations Manual, Section 10.
- Review quality control results and acceptance criteria following a change of reagent or calibrator lot.

Commercial controls should be used according to the guidelines and recommendations of the control manufacturer. Concentration ranges provided in the control package insert should be used only for guidance.

For any control material in use, the laboratory should ensure that the matrix of the control material is suitable for use in the assay per the assay package insert.

Quality Control Guidance

Refer to "Basic QC Practices" by James O Westgard, Ph.D. for guidance on laboratory quality control practices.¹⁹

Verification of Assay Claims

For protocols to verify package insert claims, refer to Verification of Assay Claims in the Alinity ci-series Operations Manual.

RESULTS

Calculation

The Alinity c Alanine Aminotransferase assay utilizes the Factor data reduction method to generate a calibration curve and results. The calibration factor for the Alinity c Alanine Aminotransferase assay is 8141.

Flags

Some results may contain information in the Flags field. For a description of the flags that may appear in this field, refer to the Alinity ci-series Operations Manual, Section 5.

Measuring Interval

Measuring interval is defined as the range of values in U/L which meets the limits of acceptable performance for linearity, imprecision, and bias.

The measuring interval of the Alinity c Alanine Aminotransferase assay is 5 to 3899 U/L.

LIMITATIONS OF THE PROCEDURE

Refer to the SPECIMEN COLLECTION AND PREPARATION FOR ANALYSIS and SPECIFIC PERFORMANCE CHARACTERISTICS sections of this package insert.

EXPECTED VALUES

It is recommended that each laboratory determine its own reference range based upon its particular locale and population characteristics.

Reference Range

Serum/Plasma^{20, 21}

	Range (U/L)
Adult	0 to 55

SPECIFIC PERFORMANCE CHARACTERISTICS

Representative performance data are provided in this section. Results obtained in individual laboratories may vary.

The Alinity c analyzer, and the ARCHITECT c System and AEROSET System utilize the same reagents and sample/reagent ratios.

Unless otherwise specified, all studies were performed on the Alinity c analyzer.

Precision

Within-Laboratory Precision

A study was performed based on guidance from CLSI EP05-A2. Testing was conducted using 1 lot of Alinity c Alanine Aminotransferase Reagent Kit, water calibrator, and 1 lot of commercially available controls, and 1 instrument. Three controls were assayed in a minimum of 2 replicates at 2 separate times per day on 20 different days.²²

Sample	n	Mean (U/L)	Within-Run (Repeatability)		Within-Laboratory (Total) ^a	
			SD	%CV	SD	%CV
Control Level 1	120	50	0.5	1.8	0.9	2.8
Control Level 2	120	138	0.7	0.6	1.0	1.0
Control Level 3	120	230	0.7	0.3	1.4	0.6

^a Includes within-run, between-run, and between-day variability.

Lower Limits of Measurement

A study was performed based on guidance from CLSI EP17-A2 and was replicated on 3 reagent lots and 2 instruments over a minimum of 3 days on each instrument/reagent lot combination. The maximum observed Limit of Blank (LoB), Limit of Detection (LoD) and Limit of Quantitation (LoQ) values are reported in the table.²³

	U/L
LoB ^a	1
LoD ^b	2
LoQ ^c	5

^a The LoB represents the 95th percentile from $n \geq 60$ replicates of zero-analyte samples.

^b The LoD represents the lowest concentration at which the analyte can be detected with 95% probability based on $n \geq 60$ replicates of low-analyte level samples.

^c The LoQ was determined from $n \geq 60$ replicates of low-analyte level samples and is defined as the lowest concentration at which a maximum allowable precision of 20 %CV was met.

Linearity

A study was performed based on guidance from CLSI EP06-A,²⁴ This assay is linear across the measuring interval of 5 to 3899 U/L.

Interference

This study was performed on the AEROSET System.

Potentially Interfering Endogenous Substances

Interference studies were conducted using NCCLS EP7-P.²⁵

Interference effects were assessed by Dose Response and Paired Difference methods, at the medical decision level of the analyte.

Potentially Interfering Substance	Interferent Level		Target U/L	Recovery (% of Target)
	Default Units	Alternate Units		
Bilirubin	30 mg/dL	513 µmol/L	53.1	95.3
	60 mg/dL	1026 µmol/L	53.1	88.1
Hemoglobin	750 mg/dL	7.5 g/L	47.4	107.9
	1000 mg/dL	10.0 g/L	47.4	111.0
Intralipid	590 mg/dL	5.5 g/L	50.6	97.2
	625 mg/dL	6.25 g/L	50.6	96.8

The following drugs were tested on the ARCHITECT system for interference at the concentrations indicated using an acceptance criteria of $\pm 10\%$ from the target value.

Potentially Interfering Substance	Interferent Level		Target U/L	Recovery (% of Target)
	Default Units	Alternate Units		
Sulfapyridine	60 mg/L	241.0 µmol/L	43.1	95.1
Sulfasalazine	20 mg/L	50.3 µmol/L	43.1	92.8
Temizolamide	20 mg/L	103.1 µmol/L	58.2	105.0

Interferences from medications or endogenous substances may affect results.²⁶

Method Comparison

A study was performed based on guidance from CLSI EP9-A3 using the Passing-Bablok regression method.²⁷

	Units	n	Correlation		Concentration	
			Coefficient	Intercept	Slope	Range
Alinity c Alanine Aminotransferase vs ARCHITECT Alanine Aminotransferase	Serum U/L	130	1.00	1.11	0.97	6-3727

BIBLIOGRAPHY

















- US Department of Labor, Occupational Safety and Health Administration, 29 CFR Part 1910.1030, Bloodborne pathogens.
- US Department of Health and Human Services. *Biosafety in Microbiological and Biomedical Laboratories*. 5th ed. Washington, DC: US Government Printing Office; December 2009.
- World Health Organization. *Laboratory Biosafety Manual*. 3rd ed. Geneva: World Health Organization; 2004.
- Clinical and Laboratory Standards Institute (CLSI). *Protection of Laboratory Workers From Occupationally Acquired Infections: Approved Guideline—Fourth Edition*. CLSI Document M29-A4. Wayne, PA: CLSI; 2014.
- Burk CA, Ashwood ER, editors. *Tietz Textbook of Clinical Chemistry*, 2nd ed. Philadelphia, PA: WB Saunders; 1994:795–797.
- Henry RJ, Cannon DC, Winkelman JW. *Clinical Chemistry Principles and Techniques*, 2nd ed. Hagerstown, MD: Harper and Row; 1974:888.
- Ruby SG, Reiber NE, Lonser RE. Preanalytical variation in alanine aminotransferase. *Clin Chem* 1988;34(4):744–745.
- Heins M, Hall W, Withold W. Storage of serum and whole blood samples? Effects of time and temperature on 22 serum analytes. *Eur J Clin Chem Clin Biochem* 1995;33:231–238.
- Dale JC, Pruett SK. Phlebotomy—a minimalist approach. *Mayo Clin Proc* 1993;68(3):249-255.
- Young D. *Effects of Preanalytical Variables on Clinical Laboratory Tests*, 2nd ed. Washington, DC: AACCPress; 1997:3-12.
- Elfath D, Cooney J, McDaniel R, et al. Effect of frozen storage of serum on the level of 22 chemistry analytes [Poster 0102 presented at AACCP 43rd National Meeting in Washington, DC: July 30, 1991]. *Clin Chem* 1991;37(6):931.
- Faulkner AM, Lukes-Hall AM, White GW. Evaluation of the Greiner plasma separator blood tube. *Ann Clin Biochem* 1990;27:386-387.
- Wilding P, Zilva JA, Wilde CE. Transport of specimens for clinical chemistry analysis. *Ann Clin Biochem* 1977;14:301–306.
- Schwartz MK. Interferences in diagnostic biochemical procedures. *Adv Clin Chem* 1973;16:10.
- Mosley JW, Goodwin RF. Stability of serum glutamic pyruvic transaminase activity on storage. *Am J Clin Pathol* 1965;44:591-595.
- Williams K, Williams A, Kirne L, et al. Stability of serum alanine aminotransferase activity. *Transfusion* 1987;27(5):431–433.
- Cucchierini B, Nussbaum S, Seiff L, et al. Stability of aspartate aminotransferase and alanine aminotransferase activities. *J Lab Clin Med* 1983;102(3):370-376.
- Donnelly JG, Soldin SJ, Nealon DA, et al. Stability of twenty-five analytes in human serum at 22°C, 4°C, and -20°C. *Pediatr Pathol Lab Med* 1995;15:869-874.
- Westgard JO. *Basic QC Practices*. 3rd ed. Madison, WI: Westgard Quality Corporation; 2010.
- Kaplan LA, Pesce AJ, editors. *Clinical Chemistry Theory, Analysis, and Correlation*, 2nd ed. St Louis, MO: CV Mosby; 1989:895–898.
- Sherman KE, Dodd RY, et al. Alanine aminotransferase levels among volunteer blood donors: geographic variation and risk factors. *J Infect Dis* 1982;145(3):383-386.

22. Clinical and Laboratory Standards Institute (CLSI). *Evaluation of Precision Performance of Quantitative Measurement Methods; Approved Guideline—Second Edition*. CLSI Document EP05-A2. Wayne, PA: CLSI; 2004.
23. Clinical and Laboratory Standards Institute (CLSI). *Evaluation of Detection Capability for Clinical Laboratory Measurement Procedures; Approved Guideline—Second Edition*. CLSI Document EP17-A2. Wayne, PA: CLSI; 2012.
24. Clinical and Laboratory Standards Institute (CLSI). *Evaluation of the Linearity of Quantitative Measurement Procedures: A Statistical Approach; Approved Guideline*. CLSI Document EP06-A. Wayne, PA: CLSI; 2003.
25. National Committee for Clinical Laboratory Standards (NCCLS). *Interference Testing in Clinical Chemistry; Proposed Guideline*. NCCLS Document EP7-P. Villanova, PA: NCCLS; 1986.
26. Young DS. *Effects of Drugs on Clinical Laboratory Tests*, 4th ed. Washington, DC: AACC Press; 1995:3-16–3-22.
27. Clinical and Laboratory Standards Institute (CLSI). *Measurement Procedure Comparison and Bias Estimation Using Patient Samples; Approved Guideline—Third Edition*. CLSI Document EP09-A3. Wayne, PA: CLSI; 2013.

Note for number formatting:

- A space is used as thousands separator (example: 10 000 specimens).
- A period is used to separate the integer part from the fractional part of a number written in decimal form (example: 3.12%).

Key to Symbols

ISO 15223 Symbols	
	Consult instructions for use
	Manufacturer
	Sufficient for
	Temperature limitation
	Use by/Expiration date
	In Vitro Diagnostic Medical Device
	Lot Number
	List Number
	Serial number
Other Symbols	
	Distributed in the USA by
	Information needed for United States of America only
	Produced for Abbott by
	Product of Canada
	Reagent 1
	Reagent 2
	For use by or on the order of a physician only (applicable to USA classification only).

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Alinity ^c

Aspartate Aminotransferase Reagent Kit



en

AST

08P17

G71194R06

B8P170

Read Highlighted Changes: Revised February 2018.

REF 08P1720

Instructions must be carefully followed. Reliability of assay results cannot be guaranteed if there are any deviations from these instructions.

NAME

Alinity c Aspartate Aminotransferase Reagent Kit (also referred to as AST)

INTENDED USE

The Alinity c Aspartate Aminotransferase assay is used for the quantitation of aspartate aminotransferase in human serum or plasma on the Alinity c analyzer.

SUMMARY AND EXPLANATION OF THE TEST

Aspartate aminotransferase (AST), also referred to as glutamate oxaloacetate transaminase (GOT), is one of a group of enzymes which catalyzes the interconversion of amino acids and α -keto acids by transfer of amino groups. Both AST and alanine aminotransferase (ALT) are normally found in most body fluids, but not in urine except in instances of kidney lesions. The greatest concentrations of AST are found in heart, liver, muscle, and kidney tissues. Damage to these tissues can greatly elevate serum AST levels. Following myocardial infarction, AST in serum begins to increase within 6 to 8 hours of onset of pain, reaching a peak within 18 to 24 hours and falling to normal by the fourth or fifth day. Serum values may increase to 10 to 15 times normal levels and the increase is roughly proportional to the degree of tissue damage.^{1, 2}

PRINCIPLES OF THE PROCEDURE

AST present in the sample catalyzes the transfer of the amino group from L-aspartate to α -ketoglutarate, forming oxaloacetate and L-glutamate. Oxaloacetate in the presence of NADH and malate dehydrogenase (MDH) is reduced to L-malate. In this reaction, NADH is oxidized to NAD. The reaction is monitored by measuring the rate of decrease in absorbance at 340 nm due to the oxidation of NADH to NAD.

Methodology: Enzymatic (NADH (without P-5'-P))

For additional information on system and assay technology, refer to the Alinity ci-series Operations Manual, Section 3.

REAGENTS**Kit Contents**

Alinity c Aspartate Aminotransferase Reagent Kit 08P17

Volumes (mL) listed in the table below indicate the volume per cartridge.

REF	08P1720
Tests per cartridge	360
Number of cartridges per kit	10
Tests per kit	3600
R1	68.1 mL
R2	21.0 mL

R1 Active ingredients: β -NADH (0.16 mg/mL), Malate Dehydrogenase (0.64 U/mL), Lactate Dehydrogenase (0.64 U/mL), L-Aspartate (232 mmol/L).

R2 Active ingredients: α -Ketoglutarate (51.3 mmol/L), L-Aspartate (100 mmol/L).

Warnings and Precautions

- **IVD**
- For *In Vitro* Diagnostic Use
- **Rx ONLY**

Safety Precautions

CAUTION: This product requires the handling of human specimens. It is recommended that all human-sourced materials be considered potentially infectious and handled in accordance with the OSHA Standard on Bloodborne Pathogens, Biosafety Level 2 or other appropriate biosafety practices should be used for materials that contain or are suspected of containing infectious agents.^{3,6}

The following warnings and precautions apply to: R2	
H316	Causes mild skin irritation.
P332+P313	If skin irritation occurs: Get medical advice / attention.

* Not applicable where regulation EU 1272/2008 (CLP) or OSHA Hazard Communication 29CFR 1910.1200 (HCS) 2012 have been implemented.

Safety Data Sheets are available at www.abbottdiagnostics.com or contact your local representative.

For a detailed discussion of safety precautions during system operation, refer to the Alinity ci-series Operations Manual, Section 8.

Reagent Handling

- Reagents are shipped refrigerated or on wet ice.
- Upon receipt, place reagent cartridges in an upright position for 8 hours before use to allow bubbles that may have formed to dissipate.
- If a reagent cartridge is dropped, place in an upright position for 8 hours before use to allow bubbles that may have formed to dissipate.
- Reagents are susceptible to the formation of foam and bubbles. Bubbles may interfere with the detection of the reagent level in the cartridge and cause insufficient reagent aspiration that may adversely affect results.

For a detailed discussion of reagent handling precautions during system operation, refer to the Alinity ci-series Operations Manual, Section 7.

Reagent Storage

	Storage Temperature	Maximum Storage Time	Additional Storage Instructions
Unopened	2 to 8°C	Until expiration date	Store in upright position.
Onboard	System Temperature	30 days	
Opened	2 to 8°C	Until expiration date	Store in upright position. Do not reuse original reagent caps or replacement caps due to the risk of contamination and the potential to compromise reagent performance.

Reagents may be stored on or off the system. If removed from the system, store reagents with new replacement caps in an upright position at 2 to 8°C. For reagents stored off the system, it is recommended that they be stored in their original trays or boxes to ensure they remain upright.

For information on unloading reagents, refer to the Alinity ci-series Operations Manual, Section 5.

Indications of Reagent Deterioration

Deterioration of the reagents may be indicated when a calibration error occurs or a control value is out of the specified range. Associated test results are invalid, and samples must be retested. Assay recalibration may be necessary.

For troubleshooting information, refer to the Alinity ci-series Operations Manual, Section 10.

INSTRUMENT PROCEDURE

The Alinity c Aspartate Aminotransferase assay file must be installed on the Alinity c analyzer prior to performing the assay.

For detailed information on assay file installation and viewing and editing assay parameters, refer to the Alinity ci-series Operations Manual, Section 2.

For information on printing assay parameters, refer to the Alinity ci-series Operations Manual, Section 5.

For a detailed description of system procedures, refer to the Alinity ci-series Operations Manual.

SPECIMEN COLLECTION AND PREPARATION FOR ANALYSIS

Specimen Types

The specimen types listed below were verified for use with this assay. Other specimen types, collection tube types, and anticoagulants have not been verified with this assay.

Specimen Type	Collection Vessel	Special Conditions
Serum	Serum tubes (with or without gel barrier)	
Plasma	Collection tubes Acceptable anticoagulants are: Lithium heparin (with or without gel barrier) Sodium heparin	Do not use ammonium heparin. ⁷

- The instrument does not provide the capability to verify specimen types. It is the responsibility of the operator to verify that the correct specimen types are used in the assay.

Specimen Conditions

- For accurate results, serum and plasma specimens should be free of fibrin, red blood cells, and other particulate matter. Serum specimens from patients receiving anticoagulant or thrombolytic therapy may contain fibrin due to incomplete clot formation.
- For accurate results, plasma specimens should be free of platelets and other particulate matter. Ensure centrifugation is adequate to remove platelets.
- To prevent cross contamination, use of disposable pipettes or pipette tips is recommended.

Preparation for Analysis

- Follow the tube manufacturer's processing instructions for collection tubes. Gravity separation is not sufficient for specimen preparation.
- Specimens should be free of bubbles. Remove bubbles with an applicator stick before analysis. Use a new applicator stick for each specimen to prevent cross-contamination.

To ensure consistency in results, recentrifuge specimens prior to testing if

- they contain fibrin, red blood cells, or other particulate matter.

NOTE: If fibrin, red blood cells, or other particulate matter are observed, mix by low speed vortex or by inverting 10 times prior to recentrifugation.

Specimen Storage

Specimen Type	Temperature	Maximum Storage Time
Serum/Plasma	20 to 25°C	4 days ⁸
	2 to 8°C	7 days ^{8, 9}
	-20°C	12 weeks ⁸

Avoid multiple freeze/thaw cycles.

Guder et al. suggest storage of frozen specimens at -20°C for no longer than the time intervals cited above.⁹

Each laboratory may establish a range around -20°C from either the freezer manufacturer's specifications or your laboratory standard operating procedure(s) for specimen storage.

Stored specimens must be inspected for particulates. If present, mix with a low speed vortex or by inversion and centrifuge the specimen to remove particulates prior to testing.

Specimen Shipping

Package and label specimens in compliance with applicable state, federal, and international regulations covering the transport of clinical specimens and infectious substances.

PROCEDURE

Materials Provided

08P17 Alinity c Aspartate Aminotransferase Reagent Kit

Materials Required but not Provided

- Alinity c Aspartate Aminotransferase assay file
- Commercially available controls containing aspartate aminotransferase
- Saline (0.85% to 0.90% NaCl) for specimen dilution

For information on materials required for operation of the instrument, refer to the Alinity ci-series Operations Manual, Section 1.

For information on materials required for maintenance procedures, refer to the Alinity ci-series Operations Manual, Section 9.

Assay Procedure

For a detailed description of how to run an assay, refer to the Alinity ci-series Operations Manual, Section 5.

- If using primary or aliquot tubes, refer to the Alinity ci-series Operations Manual, Section 4 to ensure sufficient specimen is present.
- To minimize the effects of evaporation, verify adequate sample cup volume is present prior to running the test.
- Minimum sample volume requirements:
 - Sample volume for single test: 5.3 µL.

NOTE: This amount does not include the dead volume plus the additional over-aspiration volume. For total sample volume requirements, refer to the Alinity ci-series Operations Manual, Section 4.
- Refer to the commercially available control material package insert for preparation and usage.
- For general operating procedures, refer to the Alinity ci-series Operations Manual, Section 5.
- For optimal performance, it is important to perform routine maintenance as described in the Alinity ci-series Operations Manual, Section 9. Perform maintenance more frequently when required by laboratory procedures.

Sample Dilution Procedures

Samples with an aspartate aminotransferase value exceeding 4202 U/L are flagged with the code "> 4202 U/L" and may be diluted with either the Automated Dilution Protocol or the Manual Dilution Procedure.

Automated Dilution Protocol

If using an automated dilution protocol, the system performs a dilution of the sample and automatically calculates the enzyme activity value by multiplying the result by the dilution factor. For details on configuring automated dilutions, refer to the Alinity ci-series Operations Manual, Section 2.

Manual Dilution Procedure

Dilute the sample with saline (0.85% to 0.90% NaCl).

The operator must enter the dilution factor in the Specimen or Control tab of the Create Order screen. The system will use this dilution factor to automatically calculate the enzyme activity value of the sample and report the result.

If the operator does not enter the dilution factor, the result must be manually multiplied by the appropriate dilution factor before reporting the result. If a diluted sample result is flagged indicating it is less than the lower value of the measuring interval of 3 U/L, do not report the result. Rerun using an appropriate dilution.

For detailed information on ordering dilutions, refer to the Alinity ci-series Operations Manual, Section 5.

Calibration

For instructions on performing a calibration, refer to the Alinity ci-series Operations Manual, Section 5.

Calibration is stable for approximately 30 days (720 hours), but is required with each change in reagent lot. Verify calibration with at least 2 levels of controls according to the established quality control requirements for your laboratory. If control results fall outside acceptable ranges, recalibration may be necessary.

This assay may require recalibration after maintenance to critical parts or subsystems or after service procedures have been performed.

Quality Control Procedures

As appropriate, refer to your laboratory standard operating procedure(s) and/or quality assurance plan for additional quality control requirements and potential corrective actions.

- Two levels of controls (normal and abnormal) are to be run every 24 hours.
- If more frequent control monitoring is required, follow the established quality control procedures for your laboratory.
- If quality control results do not meet the acceptance criteria defined by your laboratory, sample results may be suspect. Follow the established quality control procedures for your laboratory. Recalibration may be necessary. For troubleshooting information, refer to the Alinity ci-series Operations Manual, Section 10.
- Review quality control results and acceptance criteria following a change of reagent or calibrator lot.

Commercial controls should be used according to the guidelines and recommendations of the control manufacturer. Concentration ranges provided in the control package insert should be used only for guidance.

For any control material in use, the laboratory should ensure that the matrix of the control material is suitable for use in the assay per the assay package insert.

Quality Control Guidance

Refer to "Basic QC Practices" by James O. Westgard, Ph.D. for guidance on laboratory quality control practices.¹⁰

Verification of Assay Claims

For protocols to verify package insert claims, refer to Verification of Assay Claims in the Alinity ci-series Operations Manual.

RESULTS

Calculation

The Alinity c Aspartate Aminotransferase assay utilizes the Factor data reduction method to generate a calibration and results.

The calibration factor for the Alinity c Aspartate Aminotransferase assay is 8141.

Flags

Some results may contain information in the Flags field. For a description of the flags that may appear in this field, refer to the Alinity ci-series Operations Manual, Section 5.

Measuring Interval

Measuring interval is defined as the range of values in U/L which meets the limits of acceptable performance for linearity, imprecision, and bias.

The measuring interval of the Alinity c Aspartate Aminotransferase assay is 3 U/L to 4202 U/L.

LIMITATIONS OF THE PROCEDURE

Refer to the SPECIMEN COLLECTION AND PREPARATION FOR ANALYSIS and SPECIFIC PERFORMANCE CHARACTERISTICS sections of this package insert.

EXPECTED VALUES

It is recommended that each laboratory determine its own reference range based upon its particular locale and population characteristics.

Reference Range

Serum/Plasma¹¹

	Range (U/L)
Adult	5 to 34

SPECIFIC PERFORMANCE CHARACTERISTICS

Representative performance data are provided in this section. Results obtained in individual laboratories may vary.

The Alinity c analyzer, and the ARCHITECT c System and AEROSSET System utilize the same reagents and sample/reagent ratios.

Unless otherwise specified, all studies were performed on the Alinity c analyzer.

Precision

Within-Laboratory Precision

A study was performed based on guidance from CLSI EP05-A2.

Testing was conducted using 1 lot of the Alinity c Aspartate Aminotransferase Reagent Kit, 1 lot of commercially available controls and 1 instrument. Three controls and one human serum panel were assayed in a minimum of 2 replicates at 2 separate times per day on 20 different days.¹²

Sample	n	Mean (U/L)	Within-Run (Repeatability)		Within-Laboratory (Total) ^a	
			SD	%CV	SD	%CV
Control Level 1	120	42	0.5	1.2	0.6	1.4
Control Level 2	120	122	0.7	0.6	1.3	1.1
Control Level 3	120	251	0.8	0.3	1.4	0.6
Panel	119	177	0.7	0.4	0.8	0.5

^a Includes within-run, between-run, and between-day variability.

Lower Limits of Measurement

A study was performed based on guidance from CLSI EP17-A2. Testing was conducted using 3 lots of the Alinity c Aspartate Aminotransferase Reagent Kit on each of 2 instruments over a minimum of 3 days. The maximum observed Limit of Blank (LoB), Limit of Detection (LoD), and Limit of Quantitation (LoQ) values are summarized below.¹³

	UL
LoB ^a	1
LoD ^b	3
LoQ ^c	3

^a The LoB represents the 95th percentile from $n \geq 60$ replicates of zero-analyte samples.

^b The LoD represents the lowest concentration at which the analyte can be detected with 95% probability based on $n \geq 60$ replicates of low-analyte level samples.

^c The LoQ was determined from $n \geq 60$ replicates of low-analyte level samples and is defined as the lowest concentration at which a maximum allowable precision of 20 %CV was met.

Linearity

A study was performed based on guidance from CLSI EP06-A.¹⁴ This assay is linear from 3 to 4202 U/L.

Interference

This study was performed on the AEROSET System.

Potentially Interfering Endogenous Substances

Interference studies were conducted using NCCLS EP7-P. Interference effects were assessed by Dose Response and Paired Difference methods, at the medical decision level of the analyte.¹⁵

Potentially Interfering Substance	Interferent Level		Target Level (U/L)	Recovery (% of Target)
	Default Units	Alternate Units		
Bilirubin	30 mg/dL	513 µmol/L	72.2	95.8
	60 mg/dL	1026 µmol/L	72.2	91.9
Hemoglobin	62 mg/dL	0.62 g/L	64.5	105.7
	125 mg/dL	1.25 g/L	64.5	111.6
Intralipid	590 mg/dL	5.5 g/L	69.0	95.4
	625 mg/dL	6.25 g/L	69.0	103.9

The following drugs were tested on the ARCHITECT system for interference at the concentrations indicated using an acceptance criteria of $\pm 10\%$ from the target value.

Potentially Interfering Substance	Interferent Level		Target Level (U/L)	Recovery (% of Target)
	Default Units	Alternate Units		
Sulfapyridine	300 mg/L	12048 µmol/L	14.4	101.2
Sulfasalazine	300 mg/L	753.8 µmol/L	14.4	98.4
Trimethoprim	20 mg/L	103.1 µmol/L	35.9	106.0

Interferences from medication or endogenous substances may affect results.¹⁶

Method Comparison

A study was performed based on guidance from CLSI EP09-A3 using the Passing-Bablok regression method.¹⁷

	Units	n	Correlation		Concentration	
			Coefficient	Intercept	Slope	Range
Alinity c Aspartate Aminotransferase vs ARCHITECT Aspartate Aminotransferase	Serum U/L	114	1.00	0.15	0.96	4-4025






BIBLIOGRAPHY

- Burris CA, Ashwood ER, editors. *Tietz Textbook of Clinical Chemistry*, 2nd ed. Philadelphia, PA: WB Saunders; 1994:790-791.
- Friedman RB, Young DS. *Effects of Disease on Clinical Laboratory Tests*. Washington, DC: AACC Press; 1989:3-38-3-41.
- US Department of Labor, Occupational Safety and Health Administration, 29 CFR Part 1910.1030, Bloodborne pathogens.
- US Department of Health and Human Services. *Biosafety in Microbiological and Biomedical Laboratories*, 5th ed. Washington, DC: US Government Printing Office; December 2009.
- World Health Organization. *Laboratory Biosafety Manual*, 3rd ed. Geneva: World Health Organization; 2004.
- Clinical and Laboratory Standards Institute (CLSI). *Protection of Laboratory Workers From Occupationally Acquired Infections: Approved Guideline—Fourth Edition*. CLSI Document M29-A4. Wayne, PA: CLSI; 2014.
- Burris CA, Ashwood ER, editors. *Tietz Textbook of Clinical Chemistry*, 2nd ed. Philadelphia, PA: WB Saunders; 1994:795.
- Guder WG, Narayanan S, Wisser H, et al. List of analytes—preanalytical variables. Annex In: *Samples: From the Patient to the Laboratory*. Darmstadt, Germany: GIT Verlag; 1996:Annex 8-9.
- US Pharmacopoeial Convention, Inc. General notices. In: *US Pharmacopoeia National Formulary*, 1995 ed (USP 23/NF 18). Rockville, MD: The US Pharmacopoeial Convention, Inc.; 1994:11.
- Westgard JO. *Basic QC Practices*, 3rd ed. Madison, WI: Westgard Quality Corporation; 2010.
- Kaplan LA, Pesce AJ, editors. *Clinical Chemistry Theory, Analysis, and Correlation*, 3rd ed. St Louis, MO: CV Mosby; 1995:523.
- Clinical and Laboratory Standards Institute (CLSI). *Evaluation of Precision Performance of Quantitative Measurement Methods: Approved Guideline—Second Edition*. CLSI Document EP05-A2. Wayne, PA: CLSI; 2004.
- Clinical and Laboratory Standards Institute (CLSI). *Evaluation of Detection Capability for Clinical Laboratory Measurement Procedures: Approved Guideline—Second Edition*. CLSI Document EP17-A2. Wayne, PA: CLSI; 2012.
- Clinical and Laboratory Standards Institute (CLSI). *Evaluation of the Linearity of Quantitative Measurement Procedures: A Statistical Approach: Approved Guideline*. CLSI Document EP06-A. Wayne, PA: CLSI; 2003.
- National Committee for Clinical Laboratory Standards (NCCLS). *Interference Testing in Clinical Chemistry: Proposed Guideline*. NCCLS Document EP7-P. Villanova, PA: NCCLS; 1986.
- Young DS. *Effects of Drugs on Clinical Laboratory Tests*, 4th ed. Washington, DC: AACC Press; 1995:3-68-3-79.
- Clinical and Laboratory Standards Institute (CLSI). *Measurement Procedure Comparison and Bias Estimation Using Patient Samples: Approved Guideline—Third Edition*. CLSI Document EP09-A3. Wayne, PA: CLSI; 2013.

Note for number formatting:

- A space is used as thousands separator (example: 10 000 specimens).
- A period is used to separate the integer part from the fractional part of a number written in decimal form (example: 3.12%).

Key to Symbols

ISO 15223 Symbols	
	Consult instructions for use
	Manufacturer
	Sufficient for
	Temperature limitation
	Use by/Expiration date
IVD	In Vitro Diagnostic Medical Device
LOT	Lot Number
REF	List Number
SN	Serial number
Other Symbols	
DISTRIBUTED IN THE USA BY	Distributed in the USA by
INFORMATION FOR USA ONLY	Information needed for United States of America only
PRODUCED FOR ABBOTT BY	Produced for Abbott by
PRODUCT OF JAPAN	Product of Japan
R1	Reagent 1
R2	Reagent 2
Rx ONLY	For use by or on the order of a physician only (applicable to USA classification only).

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LAMPIRAN 7. Kaji Etik



KOMISI ETIK PENELITIAN KESEHATAN
 HEALTH RESEARCH ETHICS COMMITTEE
 POLTEKKES KEMENKES BANDUNG
 MINISTRY OF HEALTH, BANDUNG HEALTH POLYTECHNIC

KETERANGAN LAYAK ETIK
 DESCRIPTION OF ETHICAL APPROVAL
 "ETHICAL APPROVAL"

No. 24/KEPK/EC/N/2020

Protokol penelitian yang diusulkan oleh
The research protocol proposed by

Peneliti utama : Ridi Nurfitri
Principal In Investigator

Nama Institusi : Poltekkes Kemenkes Bandung
Name of the Institution

Dengan judul:
Title

"PENETAPAN NILAI RUJUKAN AKTIVITAS AST DAN ALT USIA DEWASA DI LABORATORIUM KLINIK PRAMITA"

*"ESTABLISHMENT REFERENCE INTERVALS OF AST AND ALT ACTIVITIES IN ADULT
 AT PRAMITA CLINICAL LABORATORY"*

Dinyatakan layak etik sesuai 7 (tujuh) Standar WHO 2011, yaitu 1) Nilai Sosial, 2) Nilai Ilmiah, 3) Pemerataan Beban dan, 4) Risiko, 5) Bujukan/Eksploitasi, 6) Kerahasiaan dan Privacy, dan 7) Persetujuan Setelah Penjelasan, yang merujuk pada Pedoman CIOMS 2016. Hal ini seperti yang ditunjukkan oleh terpenuhinya indikator setiap standar.

Declared to be ethically appropriate in accordance to 7 (seven) WHO 2011 Standards, 1) Social Values, 2) Scientific Values, 3) Equitable Assessment and Benefits, 4) Risks, 5) Persuasion/Exploitation, 6) Confidentiality and Privacy, and 7) Informed Consent, referring to the 2016 CIOMS Guidelines. This is as indicated by the fulfillment of the indicators of each standard.

Pernyataan Laik Etik ini berlaku selama kurun waktu tanggal 14 Mei 2020 sampai dengan tanggal 14 Mei 2021
This declaration of ethics applies during the period May 14th, 2020 until May 14th, 2021.

May 14th, 2020
 Professor and Chairperson,

 Dr. Supriatman, SKM., M.Sc.

