

HEMOCLOT™ Factor V Reagent

REF CK071K

R 6 x 1 mL



Coagulation method for the determination of Factor V activity.

English, last revision: 01-2021

INTENDED USE:

The HEMOCLOT™ Factor V Reagent kit is a clotting method, using calcium thromboplastin, for the *in vitro* quantitative determination of Factor V (FV) activity in human citrated plasma, using a manual or automated method.

SUMMARY AND EXPLANATION:**Technical:**

FV is a glycoprotein synthesized by the liver and present in small amounts in platelets. It acts as enzymatic cofactor of activated factor X of coagulation. It is activated by thrombin and/or factor Xa in factor Va. factor Va forms a complex with factor Xa (prothrombinase complex), in the presence of phospholipids and calcium, to activate prothrombin thrombin.

Clinical¹⁻⁴:

The HEMOCLOT™ Factor V Reagent is proposed for measuring FV activity, in any clinical situation where this factor can be deficient, or increased:

- Congenital or acquired FV deficiency.
 - Hepatic disorders.
 - Accelerated clotting factor consumption (DIC).
- High level of FV is a risk factor for venous thrombosis.

PRINCIPLE:

The HEMOCLOT™ Factor V Reagent method is a clotting assay where all the extrinsic pathway clotting factors are present and in excess, excepted FV, which is brought by the diluted tested plasma, and thromboplastin.

FV is the limiting factor and clotting time obtained is inversely proportional to the concentration of FV. There is an inverse linear relationship, on a semi-logarithmic graph paper, between the FV concentration and the corresponding clotting time.

REAGENTS:

R HEMOCLOT™ Factor V Reagent : Clotting reagent containing human Factors II, VII, IX and X and highly purified fibrinogen, lyophilized in presence of preservatives and stabilizers. Contains BSA. **6 vials of 1 mL.**

WARNINGS AND PRECAUTIONS:

- Some reagents provided in these kits contain materials of human and animal origin. Whenever human plasma is required for the preparation of these reagents, approved methods are used to test the plasma for the antibodies to HIV 1, HIV 2 and HCV, and for hepatitis B surface antigen, and results are found to be negative. However, no test method can offer complete assurance that infectious agents are absent. Therefore, users of reagents of these types must exercise extreme care in full compliance with safety precautions in the manipulation of these biological materials as if they were infectious.
- Waste should be disposed of in accordance with applicable local regulations.
- Use only the reagents from the same batch of kits.
- Aging studies show that the reagents can be shipped at room temperature without degradation.
- This device of *in vitro* diagnostic use is intended for professional use in the laboratory.

REAGENT PREPARATION:

Gently remove the freeze-drying stopper, to avoid any product loss when opening the vial.

R Reconstitute the contents of each vial with exactly **1 mL of distilled water.**

Shake vigorously until complete dissolution while avoiding formation of foam and load it directly on the analyzer following application guide instruction.

For manual method, allow to stabilize for 15 minutes at room temperature (18-25°C), homogenize before use.

STORAGE AND STABILITY:

Unopened reagents should be stored at 2-8°C in their original packaging. Under these conditions, they can be used until the expiry date printed on the kit.

R Reagent stability after reconstitution, free from any contamination or evaporation, and stored closed, is of:

- **72 hours** at 2-8°C.
- **24 hours** at room temperature (18-25°C).
- **1 month** frozen at -20°C or less*
- **Stability on board of the analyzer: see the specific application.**

*Thaw only once, as rapidly as possible at 37°C and use immediately.

REAGENTS AND MATERIALS REQUIRED BUT NOT PROVIDED:**Reagents:**

- Distilled water.
- Imidazole buffer (AR021B/AR021K/AR021L/AR021M/AR021N).
- Calcium Thromboplastin.
- Specific calibrators and controls:

| Product Name | Reference |
|----------------------------------|-----------|
| BIOPHEN™ Plasma Calibrator | 222101 |
| BIOPHEN™ Normal Control Plasma | 223201 |
| BIOPHEN™ Abnormal Control Plasma | 223301 |

Also refer to the specific application guide of the analyzer used.

Materials:

- Water-bath, semi-automatic or automatic analyzer for clotting assays.
- Stopwatch; Calibrated pipettes; silicon glass or plastic test tubes.

SPECIMEN COLLECTION AND PREPARATION:

The blood (9 volumes) should be carefully collected onto the trisodium citrate anticoagulant (1 volume) (0.109 M, 3.2%) by clean venipuncture. Discard the first tube.

Specimens should be prepared and stored in accordance with applicable local guidelines (for the United States, see the CLSI H21-A5⁵ guideline for further information concerning specimen collection, handling and storage).

For plasma storage, please refer to references⁵.

PROCEDURE:

The kit can be used in manual or automated method. Perform the test at 37°C and the clotting time, triggered by addition of Calcium Thromboplastin, is measured.

Assay method:

1. Reconstitute the calibrators and controls as indicated in the specific instructions. Prepare 2 mL of normal citrated human pooled plasma **diluted 1:10** in Imidazole buffer. By definition, this ten fold dilution of the normal citrated human plasma pool corresponds to a concentration of **100% of FV**. Use this 1:10 dilution to prepare the following calibration curve:

| Dilution | 1:160 | 1:80 | 1:40 | 1:20 | 1:10 |
|------------------|----------|----------|----------|----------|------|
| FV (%) | 6.25* | 12.5 | 25 | 50 | 100 |
| Plasma pool 1:10 | 0.060 mL | 0.125 mL | 0.250 mL | 0.500 mL | 1 mL |
| Imidazole Buffer | 0.900 mL | 0.875 mL | 0.750 mL | 0.500 mL | 0 mL |

*complementary dilution is recommended for high accuracy for the low range $\leq 10\%$.

The calibration curve can also be established with the BIOPHEN™ Plasma Calibrator (222101), using the FV (C) indicated on the flyer for the lot used. The calibration curve must be prepared just before running the assay.

2. Tested plasmas and controls must be diluted with imidazole buffer as described in the table below :

| Specimens | Reference | Dilution |
|-----------|---------------|----------|
| Control | 223201/223301 | 1:10 |
| Specimens | N.A. | 1:10 |

3. Dispense the following to the test tube or cuvette:

| | Volume |
|--|-------------|
| Calibrator, or diluted plasma or controls diluted 1:10 | 100 μ L |
| R HEMOCLOT™ Factor V Reagent | 100 μ L |
| Incubate at 37°C for 1 minute, then add the following (starting the stopwatch) : | |
| Calcium Thromboplastin preincubated at 37°C. | 200 μ L |
| Record the exact clotting time (sec) | |

Establish the calibration curve and test it with the quality controls. If stored at room temperature (18-25°C), test the diluted specimens quickly. The exact calibrator and control concentrations for each batch are indicated on the flyer provided with the kit.

The user is responsible for validating any changes and their impact on all results.

For an automated method, application guides are available on request. See specific application guide and specific precautions for each analyzer.

CALIBRATION:

The HEMOCLOT™ Factor V Reagent assay can be calibrated for the assay of FV. The plasma calibrator covering the dynamic test range is available from HYPHEN BioMed (see the "REAGENTS AND MATERIALS REQUIRED BUT NOT PROVIDED" paragraph) and can be used to establish the calibration curve.

QUALITY CONTROL:

The use of quality controls serves to validate method compliance, along with between-test assay homogeneity for a given batch of reagents.

Include the quality controls with each series, as per good laboratory practice, in order to validate the test. A new calibration curve should be established, preferably for each test series, and at least for each new reagent batch, or after analyzer maintenance, or when the measured quality control values fall outside the acceptance range for the method. Each laboratory must define its acceptance ranges and verify the expected performance in its analytical system.

RESULTS:

- For the manual endpoint method, plot the calibration curve lin-log, with the clotting time (sec) along the Y-axis and the FV concentration, expressed as %, along the X-axis.
- The concentration of FV (%) in the test specimen is directly inferred from the calibration curve, when the standard dilution is used.
- The results should be interpreted according to the patient's clinical and biological condition.

LIMITATIONS:

- To ensure optimum test performance and to meet the specifications, the technical instructions validated by HYPHEN BioMed should be followed carefully.
- Any reagent presenting an unusual appearance or showing signs of contamination must be rejected.
- Any suspicious samples or those showing signs of activation must be rejected.

EXPECTED VALUES:

The normal FV level for adult plasma is usually $> 70\%$ ⁶. However, each laboratory has to determine its own normal range.

REFERENCES:

1. Asselta R. and Peyvandi F. Factor V deficiency. Semin Thromb Hemost. 2009.
2. Peyvandi F. and Menegatti M. Treatment of rare factor deficiencies in 2016. Hematology. 2016.
3. Gjonnaess H. *et al.* Studies on coagulation and fibrinolysis in pregnancy. Acta Obstet Gynecol Scand. 1975.
4. Andrew M. *et al.* Development of the human coagulation system in the full-term infant. Blood. 1987.
5. CLSI Document H21-A5: "Collection, transport, and processing of blood specimens for testing plasma -based coagulation assays and molecular hemostasis assays; approved guideline". 2008.
6. Monagle P. *et al.* Impact for clinical haemostasis laboratories. Developmental haemostasis. 2006.

SYMBOLS:

Symbols used and signs listed in the ISO 15223-1 standard, see Symbol definitions document.

Changes compared to the previous version.