

Abbott i-STAT Alinity Point of Care Analyser

This Ward Handbook has been designed to ensure that the i-STAT Alinity System is being used within the governance guidelines of the LTHT Point of Care Policy.

Contact Details

The Point of Care Testing (POCT) Team can be contacted between the hours of Mon-Sun 08:30-17:00 on:

Ext: 22338 (LGI) or 64791 (SJUH)

Mobile: 07775996028

Email: leedsth-tr.pointofcare@nhs.net

Consumables

i-STAT Creatinine Cartridges REF 03P84-25 i-STAT Controls Level 1 REF 06F12-01 i-STAT Controls Level 3 REF 06F14-01

Consumables should be ordered from Abbott through your supplies department using the reference numbers above.

Training

All users must attend a training session every 2 years.

Training sessions can be arranged directly with the clinical area Key trainer who can be identified by contacting POCT or can be arranged directly with POCT. Key trainers must be trained by POCT.

For further information, see the i-STAT Alinity User Guide [POCT-SOP-15] and Operator Manual [POCT-MAN-15].

Documentation

Please complete the sheets within this Ward Handbook, compliance will be audited every 12 months.

Electronic Simulator Record - Performed every 24 hours and recorded Quality Control Record - 2 levels performed weekly and recorded Sample Record - Every sample or EQA result recorded Reagent Register - Product information for new cartridge deliveries

Clew Updates - Every 6 months the iSTAT will require a CLEW software update. The analyser will give a warning TWO WEEKS before CLEW expiry. The POCT team will arrange for the CLEW update to be performed.

| QPulse Number: POCT-SOP-16 |
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Electronic Simulator Record

The electronic simulator needs to be performed every 24 hours with the results recorded below. This should also be performed when a new lot of cartridges are received.

| Analyser serial number | *This field must be filled in* |
|------------------------|--------------------------------|
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| Date | Simulator number | Pass/Fail (If fail - action) | Operator |
|------|------------------|---------------------------------|----------|
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Quality Control Record

Both level 1 and 3 liquid QC samples must be performed every week and when a new lot number of cartridges are received. All results must be recorded below.

QC results MUST be checked against the stated range in this document. Operator must then select on the meter if the QC has passed or failed

Please send QC results to Point of Care weekly leedsth-tr.pointofcare@nhs.net

| QC Level | Lot No. | Min | | Max | Units |
|----------|---------------|-----|---|-----|--------|
| 1 | 101170 | 364 | - | 396 | μmol/L |
| | Exp: 28/02/25 | | | | |
| 3 | 121174 | 40 | - | 46 | μmol/L |
| | Exp: 30/06/25 | | | | |

Analyser serial number

This field must be filled in

| Date | Cartridge lot number | QC Lot Number | QC Level | Result (μmol/L) | Pass/Fail | Operator |
|----------|----------------------|------------------|-------------|--------------------|---------------|----------|
| 02/07/20 | A20099 | 101123 | 1 | 400 | F (repeat) | Emma B |
| 02/07/20 | A20099 | 101123 | 1 | 390 | P | Emma B |
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Sample Record

When using the meter to run a patient or EQA sample all the information must be recorded below.

| | Cartridge | Patient ID | Results | | i-STAT | Transcription | |
|------|-----------|-------------|-------------------------------------|----------------------|--------|---------------|--------------------------|
| Date | Lot NO. | Expiry Date | (Name and DOB plus NHS/PAS/CRIS) | Creatinine µmol/L | eGFR | Operator | Transcription checked by |
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Reagent Register

Please record all the details below on the receipt of any new cartridges or QC solutions.

| Date of Receipt | Cartridge/QC | Lot Number | Expiry date | Temperature Correct? | Operator |
|--------------------|--------------|------------|-------------|-------------------------|----------|
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