The latest in POC and self-testing coag

Brendan Dabkowski

As coagulation testing moves closer to the point of care, makers of POC and self-monitoring coagulation testing systems have developed products that make it easier for their users—health care professionals and patient self-testers alike—to track and manage coagulation status.

"Since the end user is typically not laboratory trained, the POC coordinator expects the platform to have as few sources of error as possible," says David Pearman, Helena Point of Care's marketing manager of POC and hemostasis products. POC coordinators consider portability, connectivity, and pricing, too. Helena's latest offering in this market is the Cascade POC system, which, along with its ease of use, features a broad test menu and smart card technology. The company plans to launch later this year a new version of the analyzer with an enhanced user interface and larger test menu.

Another company designing its POC coagulation analyzers with usability in mind is Roche Diagnostics, where Tim Huston, director of marketing, professional diagnostics - physician office laboratory, says the shift to anticoagulation testing at the physician's office and in the patient's home should continue to drive advances in the technology and services. Roche continues to offer its CoaguChek XS systems as well as the CoaguChek XS Plus system; the latter has received CLIA-waived status and provides users with new tools and connectivity options to help manage patients on warfarin therapy. The XS Plus can now hold up to 1,000 patient results. It also has a reduced blood-application sample size requirement of 8 µL (from 10 µL), which is available with all CoaguChek systems. Coming this summer is the Coagu-Chek XS Pro system, which is FDA-cleared and features bar-code scanning and the same datamanagement functionality as the XS Plus.

In addition to demanding increasingly portable devices that require smaller sample sizes with faster analysis, customers also want more "creature comforts," says David Phillips, vice president of marketing for hemostasis/thrombosis at HemoSense/Inverness Medical. To this end, the company has added the INRatio 2 PC Connect to its INRatio 2 testing system. It's a free software program that allows users to directly transfer patient test results from the analyzer to a PC.

Still available from International Technidyne is the Hemochron Signature Elite analyzer, a handheld whole blood microcoagulation system that features new compliance technology, says Noelle Meirose, product manager, hospital coagulation. The new technology improves safety, security, and compliance and integrates data management and connectivity.

CAPTODAY's POC and self-monitoring coagulation analyzers product guide includes instruments from the aforementioned companies, as well as Abbott Point of Care, Instrumentation Laboratory, and Medtronic Cardiac Surgery.

Brendan Dabkowski is CAP TODAY associate editor.

on analyzers—point of ca	are, self-monitoring	
Part 1 of 5	Abbott Point of Care Kevin Ball kevin.ball@apoc.abbott.com Global Marketing Manager 400 College Road East Princeton, NJ 08520 609-454-9301	Helena Point of Care David Pearman dpearman@helena.com 1530 Lindbergh Dr. Beaumont, TX 77707 800-231-5663 www.helena.com
Instrument name First year sold	i-STAT 1 2000	Cascade POC 2008
No. of units sold in U.S./Outside U.S. No. of units sold in 2009 • units sold to:	8,000/4,000 	150/50
Country where analyzer designed/Manufactured Is instrument POC or self-monitoring analyzer?	U.S./U.S. POC	U.S./U.S. POC and self-monitoring analyzer
Specimen type	fingerstick, venipuncture (whole blood, anticoagulated whole blood)	fingerstick, venipuncture (whole blood, anticoagulated whole blood, plasma)
Model type Dimensions in inches (H \times W \times D)/Weight Specimen volume needs	handheld/portable 9.25 \times 3.03 \times 2.85/18.34 oz accurate volume required (pipetted, fill line on cuvette)	handheld/portable 3.9 \times 6 \times 10.5/4.25 lb accurate volume required (pipetted)
Clotting-based tests for which device has FDA-cleared applications	PT (reportable range: low 10.3 sec, high 87.5 sec; INR: low 0.9, high 8.0, ACT (kaolin), ACT (celite)	PT/INR, APTT, Celite ACT, low molecular weight heparin
Tests using other methodologies for which device has FDA-cleared applications	CHEM8+, BNP, CK-MB, troponin I, creatinine, urea nitrogen (BUN), glucose(Glu), chloride(Cl), sodium (Na), potassium (K), ionized calcium (iCa), hematocrit (Hct), hemoglobin (Hgb), pH, PC02, P02, TC02**, HC03, BEecf, S02, lactate, anion gap, ACT (Celite), ACT (Kaolin), PT/INR	_
FDA-cleared tests but not yet clinically released Tests submitted for 510(k) clearance		=
Tests in development but not yet submitted for clearance	-	direct thrombin inhibitor, fibrinogen, heparin/protamine titration
Method of endpoint detection	electrogenic	photo-mechanical
Quality control methods Electronic 	yes	yes
• Liquid • Lyophilized	no yes (plasma)	no yes (plasma)
Integrated QC with each analysis	yes	no
 Automatic lockout for QC failure Other 	yes lockout for QC failure is for failed electronic QC or per cartridge internal QC	yes
Time (in minutes) to perform control plus specimen test • PT:	3+	2
• PT & PTT: • ACT:		5 5–12
Data-management capability	optional add-on	onboard
Includes QC System can automatically transfer data to information system	yes	yes
Patient data OC data	yes	yes
Interface supplied by instrument vendor	yes yes (additional cost)	yes yes (included)
LOINC codes transmitted with results How labs get LOINC codes for reagent kit	yes package insert	no Web site
Commercially available systems for which interfaces are up and running in active user sites Lab can control analyzer remotely	Sunquest, Cerner, Soft, McKesson, Meditech, GE, Siemens, VistA, others yes	no
Real-time wireless linkage to LIS or HIS Positive identification system (e.g. bar code) for:	yes (infrared)	yes
 Patient specimen Reagent	yes no	yes yes
Onboard system for automatic error detection	yes, for sample (volume)	yes
Training provided with instrument purchase Approx. No. of training hours needed for:	yes (on site)	yes (on site) 20 minutes
 Medical staff Patient 	1 no	30 minutes — no
Patient self-testing program is available		
Instrument list price Reagent rental or lease only Cost per sample for:	call for pricing no	\$3,590 yes
PT: Cost per sample for reagent rental Cost per sample if device purchased	varies call for pricing	variable \$2.50–\$3.24
PTT: Cost per sample for reagent rental	call for pricing	\$2.50–\$3.24 variable
Cost per sample if device purchased • ACT: Cost per sample for reagent rental	call for pricing call for pricing	\$2.25–\$3.50 variable
Cost per sample if device purchased	call for pricing	\$2.25-\$3.50
CLIA '88 complexity rating	moderate	nonwaived
Unique advantages (provided by the vendor)	broad testing menu; many data-management and interfacing options; easy to use	multiple tests, same device; eight-hour battery operation; low cost/test

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Coagulation analyzers—point of care, self-monitoring					
	Helena Point of Care David Pearman dpearman@helena.com 1530 Lindbergh Drive Beaumont, TX 77704 800-231-5663	Helena Point of Care David Pearman dpearman@helena.com 1530 Lindbergh Drive Beaumont, TX 77704 800-231-5663	HemoSense/Inverness Medical David Phillips 9975 Summers Ridge Rd. San Diego, CA 92121 877-441-7440		
Part 2 of 5	www.helena.com	www.helena.com	www.hemosense.com		
Instrument name First year sold	Actalyke XL 2002	Actalyke Mini II 2004	INRatio/INRatio2 PT INR Monitor 2003 (INRatio)/2008 (INRatio2)		
No. of units sold in U.S./Outside U.S. No. of units sold in 2009 • units sold to:	300+/200+ — operating room: 40; cardiac cath lab: 45; stat lab: 15;	150+/1,000+ 	_/_ _ _		
Country where analyzer designed/Manufactured Is instrument POC or self-monitoring analyzer?	NICU: 15 U.S./U.S. POC	U.S./U.S. POC	U.S./U.S. POC and self-monitoring analyzer		
Specimen type	venipuncture (whole blood)	venipuncture (whole blood)	fingerstick		
Model type Dimensions in inches (H \times W \times D)/Weight Specimen volume needs	portable 5.6 \times 10.7 \times 10.3/15 lb accurate volume required (fill line on cuvette)	portable 6.25 \times 6 \times 5/6.3 lb accurate volume required (fill line on cuvette)	handheld/portable $5.9 \times 2.9 \times 1.8$ in/9.3 oz with batteries accurate volume not necessary (drop) ~15 μL		
Clotting-based tests for which device has FDA-cleared applications	activated clotting time (ACT)–whole blood, MAX-ACT: maximum factor XII activation ACT, celite, kaolin, glass	ACT—MAX-ACT, C-ACT, K-ACT, G-ACT	PT (reportable range: low 7 sec, high 75 sec; INR: low 0.7, high 7.5)		
Tests using other methodologies for which device has FDA-cleared applications		-	none		
FDA-cleared tests but not yet clinically released	none	-	none		
Tests submitted for 510(k) clearance Tests in development but not yet submitted for clearance	— APTT (whole blood), PT (whole blood), LMWH, heparin & protamine titration (AMK)	— LMWH, APTT (whole blood), PT (whole blood), AMK	none none		
Method of endpoint detection Quality control methods	two-point electromechanical soft-clot detection principle	two-point electromechanical	electrochemical detection, change in impedance as sample clots		
Electronic	yes	yes	no (not required, built-in 2-level QC on each strip)		
Liquid Lyophilized	yes yes	yes yes	no (not required, built-in 2-level QC on each strip) no		
Integrated QC with each analysis Automatic lockwart for QQ foilure	no	no	yes		
 Automatic lockout for QC failure Other 	yes data management for entering heparin dose, L-J chart generation for all controls	no 	yes —		
Time (in minutes) to perform control plus specimen test • PT:	_	_	1		
• PT & PTT: • ACT:	5	5	-		
Data-management capability Includes QC System can automatically transfer data to information system	yes yes	no no	optional add-on (CoagClinic from Standing Stone) yes		
Patient data OC data	yes yes	-	yes yes		
Interface supplied by instrument vendor	interface specifications supplied, POCT1-A compliant	-	no		
LOINC codes transmitted with results How labs get LOINC codes for reagent kit	no —	no —	-		
Commercially available systems for which interfaces are up and running in active user sites Lab can control analyzer remotely	— no	— no	CoagClinic from Standing Stone; PPM from QAS		
Real-time wireless linkage to LIS or HIS	yes		no		
Positive identification system (e.g. bar code) for: • Patient specimen	yes	no	no		
• Reagent	yes; all disposables have bar code for identification with use on any Actalyke model	no	no		
Onboard system for automatic error detection	yes, stuck magnet, no tube; mechanical instrument parameters only; well rotation, temperature, and detection settings	yes, for stuck magnet, printer problems	yes, for sample (volume), reagent stability		
Training provided with instrument purchase Approx. No. of training hours needed for:	yes (on site)	yes (on site)	yes (on site)		
Medical staff Patient	1-2 —	1	1		
Patient self-testing program is available	no ¢2.005	NO	yes		
Instrument list price Reagent rental or lease only	\$3,805 purchase, lease, or reagent rental	\$1,024 (battery only)–\$1,334 (with printer and battery) purchase, lease, or reagent rental	\$1,595 professional; \$1,995 self-test no		
Cost per sample for:	F=. onado, roudo, or rougont rollar	personality, reading of rougent reliter			
PT: Cost per sample for reagent rental Cost per sample if device purchased	_	_	depends on volume \$5.50 per strip professional; \$10 per self-test		
• PTT: Cost per sample for reagent rental	-	_			
Cost per sample if device purchased • ACT: Cost per sample for reagent rental	_	_	-		
Cost per sample if device purchased CLIA '88 complexity rating	\$0.74–\$1.76 moderate	\$0.74–\$1.76 moderate	 waived		
Unique advantages (provided by the vendor)	two-point electromechanical soft-clot detection principle; MAX-ACT: maximum factor XII activation ACT test, 0.5-mL blood volume, linear up to 10 units of heparin, safer plastic tube construction, for use on Actalyke and Hemochron instruments; electronic clotting tube (ECT) that simulates and mimics actual blood clot formation for accurate ECT challenges; integrated printer; 3.5-in. diskette storage	two-point electromechanical soft-clot detection; magnetic detection device—electronic QC/ revolution; MAX-ACT tubes, 0.5-mL volume and linear to 6 U/mL; linear up to 6 U/mL of heparin; electronic clotting tube (ECT) available	onboard QC—two levels of quantitative controls with reportable results; simple three-step test process; human recombinant thromboplastin (ISI 1.0); individually wrapped test strips; nonrefrigerated test strips; one unmeasured drop; 12-month dating on test strips; 120-test memory, including QC values		

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Coagulation analyzers—point of care, self-monitoring					
Part 3 of 5	Instrumentation Laboratory Mike Wright mwright@ilww.com 180 Hartwell Rd. Bedford, MA 01730 781-861-4165 www.ilus.com	International Technidyne Corp. customerservice@itcmed.com 8 Olsen Ave. Edison, NJ 08820 732-548-5700 www.itcmed.com	International Technidyne Corp. customerservice@itcmed.com 8 Olsen Ave. Edison, NJ 08820 732-548-5700 www.itcmed.com		
Instrument name First year sold	Gem PCL Plus 2003	ProTime Microcoagulation System ProTime Micro: 1995; ProTime 3: 2001; New ProTime: 2006	Hemochron Signature Elite 2005		
No. of units sold in U.S./Outside U.S. No. of units sold in 2009 • units sold to: Country where analyzer designed/Manufactured Is instrument POC or self-monitoring analyzer?	>250/>250 	/ U.S./U.S. POC	/ U.S./U.S. POC		
Specimen type Model type Dimensions in inches (H \times W \times D)/Weight Specimen volume needs	fresh whole blood, citrated whole blood (fingerstick for PT only) handheld/portable $2.0 \times 7.5 \times 3.5/0.75$ lb accurate volume not necessary (~50 µL), low sample volume error message if well not filled	fingerstick handheld/portable 2.7 × 4.5 × 8.5/3 lb small blood sample volume needed, ~25 μL	venipuncture, fingerstick, fresh whole blood, citrated blood handheld/portable $2 \times 7.5 \times 3.7/1.2$ lb accurate volume not necessary, (low sample volume error message if well not filled)		
Clotting-based tests for which device has FDA-cleared applications	PT and citrate PT (reportable range: 10–150 sec; INR: 0.8–12 sec), APTT (reportable range: 20–300 sec), ACT (reportable range: 65–1,005 sec), ACT–low range	PT (reportable range: low 10 sec, high 130 sec; INR: low 0.8, high 9.9)	PT, APTT, PT citrate, APTT citrate, ACT+, ACT-LR		
Tests using other methodologies for which device has FDA-cleared applications FDA-cleared tests but not yet clinically released Tests submitted for 510(k) clearance Tests in development but not yet submitted for clearance	(reportable range: 67–400 sec) none none none none	none none 	none none — —		
Method of endpoint detection	mechanical endpoint clotting mechanism, monitored optically	mechanical clot detection	mechanical clot detection		
Quality control methods • Electronic • Liquid	yes yes (simulated whole blood)	no (not required, onboard QC) yes (available as an option but not required due to onboard controls)	yes, internal automatic EQC yes (simulated whole blood)		
 Lyophilized Integrated QC with each analysis Automatic lockout for QC failure Other 	no no yes 	no yes yes 2 levels of onboard QC integrated into each cuvette	yes (simulated whole blood) no yes operator lockout, certification lockout, audit trail,		
Time (in minutes) to perform control plus specimen test • PT: • PT & PTT: • ACT:	2 2 1–5	<5 — —	and patient identification lockout 2 1–5		
Data-management capability Includes QC	onboard (via Gem Premier 3000) yes	yes yes (onboard controls)	onboard yes		
System can automatically transfer data to information system • Patient data • QC data Interface supplied by instrument vendor LOINC codes transmitted with results How labs get LOINC codes for reagent kit Commercially available systems for which interfaces are up and running in active user sites Lab can control analyzer remotely	yes yes no no no	yes (constant contracts) yes communication cable available mo	yes yes yes yes no		
Real-time wireless linkage to LIS or HIS	no	no	no		
Positive identification system (e.g. bar code) for: • Patient specimen • Reagent	no yes	no yes	no yes		
Onboard system for automatic error detection	yes, for sample (volume), reagent, and instrument	yes, for sample (volume) and reagent/cuvette expiration date	yes, for sample (volume) and reagent/expiration date		
Training provided with instrument purchase Approx. No. of training hours needed for:	yes (on site)	yes (on site)	yes (on site)		
Medical staff Patient	30 minutes	1 1.5	1		
Patient self-testing program is available		yes (training CD/Web-based training)	no		
Instrument list price Reagent rental or lease only	\$5,329 (volume dependent) outright purchase, lease, reagent rental	\$1,749 professional, \$2,350 consumer yes	\$7,900 no		
Cost per sample for: • PT: Cost per sample for reagent rental	varies with volume	volume dependent	_		
Cost per sample if device purchased PTT: Cost per sample for reagent rental	varies with volume varies with volume	volume dependent	Ξ		
Cost per sample if device purchased • ACT: Cost per sample for reagent rental	varies with volume varies with volume	-	-		
Cost per sample if device purchased CLIA '88 complexity rating	varies with volume nonwaived	 waived	 moderate		
Unique advantages (provided by the vendor)	utilized in conjunction with the Gem Premier 3000/3500 analyzer; consolidating blood gas/ electrolytes/glucose/lactate/hematocrit/coagulation testing; comprehensive POC coagulation menu that allows for POC coagulation analysis throughout an institution; whole blood PT, citrate PT, APTT, ACT, and ACT-low range; patient safety features: automatic QC lockout, mandatory operator ID and patient ID options, database management (patient history query), fully automated sample measuring and mixer insequences acoustics of the safety features.	two levels of integral reagent control automatically run with each patient; internal instrument checks verify optical, electrical, and mechanical functions—no further calibration required; sensitive thromboplastin reagent (ISI = 1.0), as recommended by AHA, CAP, and WHO; results in less than five minutes; 16-hour room-temperature open-pouch stability of cuvette; bar-coded cuvette—no coding neccessary; accepts and stores patient ID/operator ID; automatically sends test results to printer, computer, LIS; onboard and external controls	integrated bar-code scanner; new compliance technology; QC, PID, and OID; lockout and tracking; data-management storage and printing; optimal connectivity options; blood volume 15 µL; ease of use; Ethernet and RS232 ports		

and mixing, inaccurate sample volume detection, automatic instrument and optical monitoring

computer, LIS; onboard and external controls available

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Coagulation analyzers—point of care, self-monitoring				
Part 4 of 5	International Technidyne Corp. customerservice@itcmed.com 8 Olsen Ave. Edison, NJ 08820 732-548-5700 www.itcmed.com	International Technidyne Corp. customerservice@itcmed.com 8 Olsen Ave. Edison, NJ 08820 732-548-5700 www.itcmed.com	Medtronic Cardiac Surgery 7611 Northland Drive North Minneapolis, MN 55428 800-328-3320 www.medtronic.com	
Instrument name First year sold	Signature+ Signature+ introduced in 2002	Hemochron Response 2000	HMS Plus 1999	
No. of units sold in U.S./Outside U.S. No. of units sold in 2009 • units sold to:	_/_ _ _	_/_ _ _	_/_ _ _	
Country where analyzer designed/Manufactured Is instrument POC or self-monitoring analyzer?	U.S./U.S. Poc	U.S./U.S. POC	U.S./U.S. POC	
Specimen type Model type Dimensions in inches (H × W × D)/Weight Specimen volume needs	venipuncture, fingerstick, fresh whole blood, citrated blood handheld/portable $2 \times 7.5 \times 3.75/12$ oz accurate volume not necessary (low sample volume error message if well not filled)	venipuncture, fingerstick, fresh whole blood, citrated blood handheld/portable $8.7 \times 10.5 \times 7.5/6.4$ lb accurate volume required (fill line on tubes)	venipuncture (whole blood) benchtop 15.7 \times 15 \times 13/34 lb accurate volume required (automated dispensing)	
Clotting-based tests for which device has FDA-cleared applications	PT, APTT, PT citrate, APTT citrate, ACT+, ACT-LR	ACT, (FTCA510, KACT, P214), HITT, TT, fib, HRT, KHRT, PRT, KPRT, PDAO, PDAOK, PT, APTT, PT citrated, APTT citrated	ACT, heparin dose response, heparin protamine titration	
Tests using other methodologies for which device has FDA-cleared applications FDA-cleared tests but not yet clinically released	none	none	none —	
Tests submitted for 510(k) clearance Tests in development but not yet submitted for clearance		none —	Ξ	
Method of endpoint detection Quality control methods	mechanical clot detection	mechanical clot detection	mechanical clot detection	
• Electronic • Liquid	yes yes (simulated whole blood)	yes yes (simulated whole blood)	yes no	
 Lyophilized Integrated QC with each analysis Automatic lockout for QC failure Other 	yes (simulated whole blood) no yes operator lockout	yes (simulated whole blood) no yes operator lockout	yes no optional (user defined) optional operator lockout	
Time (in minutes) to perform control plus specimen test • PT: • PT & PTT: • ACT:	2 2 1–5	2 2 1–5	— — up to 12 (depending on patient sample)	
Data-management capability Includes QC System can automatically transfer data to information system • Patient data • QC data Interface supplied by instrument vendor LOINC codes transmitted with results How labs get LOINC codes for reagent kit Commercially available systems for which interfaces are up and running in active user sites Lab can control analyzer remotely	onboard yes yes yes 	onboard yes yes yes 	yes yes yes no — Web site Telcor, RALS-Plus, Aegis POC in development no	
Real-time wireless linkage to LIS or HIS Positive identification system (e.g. bar code) for: • Patient specimen • Reagent	no no yes	no no yes	no yes yes	
Onboard system for automatic error detection	yes, for sample (volume)	yes, for sample (volume) and reagent/expiration date	yes	
Training provided with instrument purchase Approx. No. of training hours needed for: • Medical staff • Patient	yes (on site) — —	yes (on site) 1–2 –	yes (on site) 6 	
Patient self-testing program is available	no	no	no	
Instrument list price Reagent rental or lease only Cost per sample for: • PT: Cost per sample for reagent rental Cost per sample if device purchased • PTT: Cost per sample for reagent rental Cost per sample if device purchased • ACT: Cost per sample for reagent rental Cost per sample if device purchased CLIA '88 complexity rating	\$5,280 no 	\$4,055 no 	\$26,000 rental and purchase available — — — — — customer dependent, per contract moderate (nonwaived)	
Unique advantages (provided by the vendor)	blood volume—15 µL; ease of use; data-management storage and printing; connectivity options; configurable QC and operator lockout	QC lockout; data-management storage; connectivity options; RxDx heparin/protamine dosing system	automated sample dispensing; constant temperature control; multiple testing capability; HDR: heparin dose response; HPT: heparin protamine titration; high-range ACT; optional bar-code scanner; optional data-management software	

Tabulation does not represent an endorsement by the College of American Pathologists.

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	Medtronic Cardiac Surgery 7611 Northland Drive North Minneapolis, MN 55428 800-328-3320	Roche Diagnostics Courtney Sweeney courtney.sweeney@roche.com 9115 Hague Rd. Indianapolis, IN 46250	Roche Diagnostics Courtney Sweeney courtney.sweeney@roche.com 9115 Hague Rd. Indianapolis, IN 46250
Part 5 of 5	www.medtronic.com	800-852-8766 www.poc.roche.com	800-852-8766 www.poc.roche.com
Instrument name	ACT Plus	CoaguChek XS PT Test System	CoaguChek XS Plus PT Test System
First year sold	2003	2006 (international)/2007 (U.S.)	2007
No. of units sold in U.S./Outside U.S. No. of units sold in 2009 • units sold to:	- - -	_/_ _ _	_/_ _ _
Country where analyzer designed/Manufactured Is instrument POC or self-monitoring analyzer?	U.S./U.S. POC	Germany/Germany POC and self-monitoring	Germany/Germany POC
Specimen type	venipuncture (whole blood)	fresh whole blood (venous or fingerstick capillary)	fresh whole blood (venous or fingerstick capillary)
Model type Dimensions in inches (H \times W \times D)/Weight Specimen volume needs	benchtop $11 \times 8 \times 13/11.5$ lb accurate volume required (fill line on cuvette and optional easy fill accessory)	handheld/portable 5.43 \times 3.07 \times 1.10/4.48 oz 10 μL	handheld/portable 3.25 × 6.5 × 12.375/350 g 10 μL
Clotting-based tests for which device has FDA-cleared applications	ACT (high range, low range, recalcified, high range heparinase)	PT (reportable range: low 9.6 sec, high 96 sec; INR: low 0.8 sec, high 8.0 sec)	PT (reportable range: low 9.6 sec, high 96 sec; INR: low 0.8 sec, high 8.0 sec)
Tests using other methodologies for which device has FDA-cleared applications	none	none	none
FDA-cleared tests but not yet clinically released Tests submitted for 510(k) clearance Tests in development but not yet submitted for clearance	Ξ	none none none	none none none
Method of endpoint detection	mechanical clot detection	amperometric detection	amperometric detection
Quality control methods • Electronic • Liquid	yes no	no (not required, onboard QC) no	no (not required, onboard QC) yes (available as an option but not required due to
 Lyophilized Integrated QC with each analysis Automatic lockout for QC failure Other Time (in minutes) to perform control plus specimen test PT: 	yes no optional (user defined) optional operator lockout 	no yes no 	onboard controls) no yes yes optional operator lockout <1
• PT & PTT: • ACT:	— up to 12 (depends on patient sample)	Ξ	=
Data-management capability Includes QC System can automatically transfer data to information system	yes yes	no no	yes yes
Patient data QC data	yes yes	no no	yes yes
Interface supplied by instrument vendor LOINC codes transmitted with results	no 	with license no	POCT1-A no
How labs get LOINC codes for reagent kit Commercially available systems for which interfaces are up and running in active user sites	Web site Telcor, RALS-Plus, Aegis POC in development	yes	RALS-Plus
Lab can control analyzer remotely	no	no	no
Real-time wireless linkage to LIS or HIS Positive identification system (e.g. bar code) for:	no	no	no
Patient specimen Reagent	yes yes	no no	no no
Onboard system for automatic error detection	yes	yes	yes
Training provided with instrument purchase Approx. No. of training hours needed for:	yes (on site)	yes (on site)	yes (on site)
Medical staff Patient	1	1 trainer dependent	1.5 —
Patient self-testing program is available	no	yes	no
Instrument list price	\$4,200	varies by distributor	varies by distributor
Reagent rental or lease only Cost per sample for:	rental and purchase available	no	no
PT: Cost per sample for reagent rental Cost per sample if device purchased		_	-
PTT: Cost per sample for reagent rental Cost per sample if device purchased ACT: Cost per sample for reagent rental	-	-	-
 ACT: Cost per sample for reagent rental Cost per sample if device purchased CLIA '88 complexity rating 		 CLIA waived	 CLIA waived
Unique advantages (provided by the vendor)	data-management software application; duplicate	performs onboard quality control and determines	performs onboard quality control and determines
טווקשב מטימוונמצבי (גוטיועבע גא עוב יכוועטו)	test results; optional bar-code scanner; optional easy filling accessory	performs onboard quarty control and determines patient results in a single test chamber; neutralizes therapeutic levels of heparin and LMWH; INR corrected for hematocrit within specified range; 18-month strip shelf life, no refrigeration needed; top or side design results in any minute or lease	performs onboard quality control and determines patient results in a single test chamber; top or side dosing; results in one minute or less

, iop or side dosing; results in one minute or less