In vitro blood gas analyzers			
Part 1 of 8	Abbott Point of Care Kevin Ball kevin.ball@apoc.abbott.com 400 College Road East Princeton, NJ 08540 800-827-7828 www.abbottpointofcare.com	Alere, Inc. Mark Steinberg mark.steinberg@alere.com 30 South Keller Rd., Suite 100 Orlando, FL 32810 888-893-6225 www.alere.com	Instrumentation Laboratory Mike Wright mwright@ilww.com 180 Hartwell Road Bedford, MA 01730 781-861-4165 www.ilus.com
Name of device/First year sold/Number of analyzers sold in 2010 Number of devices sold in U.S./outside U.S./List price Dimensions (H x W x D)/Weight	i-STAT System/1992/— 30,000+/20,000+/\$8,761 9.25 × 3.0 × 2.85 inches/22.4 ounces	epoc Blood Analysis System/2008/— —/—/\$7,500 3 × 3.4 × 8.5 inches/~1.5 pounds	GEM Premier 3000/2000/1,450 >2,000/>8,000/\$39,995 17 × 12 × 12 inches/29.5 pounds
Analytes measured on device	pH, pCO2, pO2, Hct, Na, K, Cl, iCa, lactate, glucose,	pH, pCO2, pO2, Hct, Na, K, iCa, lactate, glucose	pH, pO2, pCO2, Hct, Na+, K+, Ca++, glucose, lactate
Parameters calculated on device	creatinine, BUN, TCO2, cTnl, CK-MB, BNP, ACT, PT/INR Hb, HcT, O2SAT, BE, TCO2, HCO3	Hb, 02SAT, BE, TCO2, HCO3	A-aDo2, Hb, pAO2, paO2/pAO2, Rl, O2cap*, O2Ct*, CtO2*, CaO2*, CvO2*, CcO2*, a-vDO2*, Qsp/Qt, P5O, HCO3-, BEb, BEcecf, SO2c
Barometric pressure Analytical method(s) or technologies employed	measured electrochemical for all analytes	recorded pH, iCa, pCO2, Na, K: potentiometry; pO2, lactate, glucose: amperometry; Hct: conductometric; Hb: calculated	— pH, pCO2: potentiometry; pO2, glucose, lactate: Na, iCa, K: amperometry; Hct: conductivity; potentiometric ion selective electrode
Device is part of a series of related models Device warranty/Loaner devices provided Average life expectancy of device Open or closed system/External gas tanks required	no 1-year replacement/yes 8 years closed/no	no initial 1-year warranty; extended warranty available 	yes 5 years/yes 7–10 years closed/no
Categorized for point-of-care testing or laboratory	point-of-care testing	point-of-care testing	point-of-care testing and laboratory
Point of care: Disposable prepackaged system used for analysis No. of disposable reagent system units in standard package No. of samples analyzed per one disposable reagent, electrode system Reagent unit storage requirements	reagent/electrode (single use) 25 per box 1 refrigerate, two-month shelf life for blood gas cartridges, two- week shelf life for all others	reagent/electrode (single use) 50 1 room temperature	multi-use cartridge 1 per pack 35-, 75-, 150-, 300-, 450-, and 600-test cartridge room temperature
Shelf life of disposable units	6–9 months	up to 6 months	6 months
Laboratory: No. of different disposable reagents required to maintain device Max. No. of analyte reagents that can reside in device at once Shelf life of components Cost per test/Reagent cost per test	_ _ _	_ _ _ _	1 1 multi-use cartridge 6 months varies with size and menu
Calibrations required Calibration frequency Internal QC program recommended QC features/Capabilities of QC features	1 point (automatic) every test electronic QC, automated internal wet QC comparable plot/monthly cumulative reports (available with external system)	1 point (automatic) every test — —	automated continuous with iQM automated continuous with iQM internal, automated, continuous quality mgmt. included onboard Intelligent Quality Management/monthly report includes number of measurements, mean, maximum, and minimum delta values
Remote control of device from laboratory System can use LOINC to transmit results to LIS	yes no	yes yes	yes no
Specimen types suitable for device Acceptable anticoagulants/Sampling technique Sample size for complete panel of analyte results Sample size differs with number of analytes selected Time from sample introduction to result availability Maximum No. of patient samples per hour/Maximum No. measured	whole blood, capillary, mixed venous, arterial, venous heparin/injection, capillary transfer, and fill blood gas 96 µL, electrolytes 65 µL no about 2 minutes 20 per unit/160	whole blood, capillary, mixed venous, arterial, venous heparin/injection, capillary transfer and fill ~92 mL no ~35 seconds	whole blood, arterial, venous, or capillary heparin/aspiration 135 to 150 µL no 85 seconds 20/180
results per hour		_	
Optimal throughput when analyzer calibrated, awaiting specimens Calibration can be interrupted to perform stat sample Known interferences		no	20 samples per hour yes —
Sampler has self-wiping probe	Ξ	no	yes
Time required for maintenance by lab personnel	-	-	none (disposable cartridge)
Service center performs diagnostics through modem Method of analyst ID in system	yes keypad entry/bar-code scanner (customizable)	no 	no (but can through VPN) manual or bar-code entry of ID and password (customizable)
Instrument response for: • hardware failure/software failure • QC failure • calibration failure For what bar-code scanning is provided	code number error message code number error message code number error message operator and patient IDs, reagent lot number	error code, rejection of card failure noted on final report card rejected operator and patient IDs, reagent lot number, all open fields	operator warning, sampling lockout channel flagged no results for channel operator and patient IDs, QC values
Built-in printer/Data port	no/—	no/—	yes/3 RS-232, 1 parallel, bar-code reader port, Ethernet port
Information listed on hard copy report	device-unique identifier, operator and patient IDs, results, QC results, QC identifier	all	patient demographics, hospital name and address, results
Analyzer connections Interface standards supported How analyzer connects to external system to upload patient and QC results	LIS/HIS, via data management system ASTM 1394 and 1238, HL7 hospital network	LIS/HIS, via data management system HL7 real-time wireless (RF)	GEMweb, GEMweb Plus, Impact for Critical Care ASTM protocol direct serial, Ethernet, modem dial-in
Information included in transmission from analyzer to external system	device-unique identifier, operator and patient IDs, results, QC identifier, others	device-unique identifier, operator and patient IDs, results, QC identifier, others	device identifier, operator and patient IDs, results, QC ID and results
Hardware and software for data management system No. of different management reports system produces Contents downloaded from data management system to analyzer	PrecisionWeb, Central Data Station 35+ valid operator IDs, device behavior customizations	software only customizable valid operator IDs, others	Impact for Critical Care customizable patient ID, demographics
System connected (live installations) to which LISs, HISs	major LIS vendors	most	major HIS/LIS vendors
Use a third-party interfacing tool, engine for LIS, HIS interfaces	yes, Sybase Interface Manager	yes, Mirth	MAS/RALS, Telcor
Distinguishing features (provided by company)	handheld, portable, single-use test cartridge menu;	room-temperature card storage (up to 6 months);	iQM detects, corrects, and documents instrument

	in vitro blood gas	/amaly2010	
Part 2 of 8	Instrumentation Laboratory Mike Wright mwright@ilww.com 180 Hartwell Road, Bedford, MA 01730 781-861-4165 www.ilus.com	Instrumentation Laboratory Bill Manchester billm@ilww.com 180 Hartwell Road, Bedford, MA 01730 781-861-4360 www.ilus.com	ITC Nexus Dx 8 Olsen Ave. Edison, NJ 08820 800-631-5945 www.itcmed.com
Name of device/First year sold/Number of analyzers sold in 2010 Number of devices sold in U.S./outside U.S./List price Dimensions (H x W x D)/Weight	GEM Premier 3500/2009/— 778 worldwide/\$45,000 17.5 × 13 × 11.8 inches/31.2 pounds	GEM Premier 4000/2006/— >4,100 worldwide/\$50,000 18 × 12 × 15 inches/44 pounds	IRMA TRUpoint Blood Analysis System/1994/— 6,000 worldwide/— 11.5 \times 9.5 \times 5 inches/5 pounds, 4 ounces
Analytes measured on device	pH, pO2, pCO2, Hct, Na+, K+, Ca++, glucose, lactate	pH, pCO2, pO2, Hct, Na, K, Cl, iCa, lactate, glucose,	pH, pCO2, pO2, Hct, Na, K, Cl, iCa, glucose, BUN,
Parameters calculated on device	A-aDo2, Hb, pAO2, pa02/pAO2, Rl, O2cap*, O2Ct*, CtO2*, CaO2*, CvO2*, CcO2*, a-Qsp/Qt, P50, HCO3-, tCO2-, BEB, BEcecf, SO2c	tHb, 02Hb, COHb, MetHb, HHb, tBili Hct, TCO2, BEecf (in vivo), BE(B) (in vivo), tHb(c), Ca++ (7.4), anion gap, P/F ratio, pA02,Ca02, Cv02, P50, 02cap, s02, s02(c), HC03-std, HC03-(c), others	creatinine, lactate Hb, O2SAT, BEb, BEecf, TCO2, HCO3-, iCa(n), creatinine MDRD-GFR
Barometric pressure Analytical method(s) or technologies employed	— pH, pCO2: potentiometry; pO2, glucose, lactate, Na, iCa, K: amperometry; Hct: conductivity; potentiometric ion-selective electrode	— pH, pCO2: potentiometry; pO2, glucose, lactate: amperometry; Hct: conductivity; Hb, tBili: spectropho- tometric; Na, Cl, iCa, K: potentiometric ion-selective electrode	measured pH, pCO2, Na, CI, iCa, K, BUN, creatinine, lactate (en- zymatic): potentiometric; pO2, glucose (enzymatic): amperometric; Hct: conductometric
Device is part of a series of related models Device warranty/Loaner devices provided Average life expectancy of device Open or closed system/External gas tanks required Categorized for point-of-care testing or laboratory	yes 5 years/yes 7–10 years closed/no point-of-care testing and laboratory	yes 5 years/yes 7–10 years closed/no point-of-care testing and laboratory	yes 1 year/yes 7 years closed/no point-of-care testing
		· · ·	·
Point of care: Disposable prepackaged system used for analysis No. of disposable reagent system units in standard package No. of samples analyzed per one disposable reagent, electrode system Reagent unit storage requirements Shelf life of disposable units	multi-use cartridge 1 per pack 75-, 150-, 300-, 450-, and 600-test cartridge room temperature 6 months	multi-use cartridge 1 per pack cartidges available: 75, 150, 300, 450, 600 room temperature 6 months	reagent/electrode (single use) 25 per box 1 room temperature; creatinine 2°–8°C up to 6 months
Laboratory: No. of different disposable reagents required to maintain device Max. No. of analyte reagents that can reside in device at once Shelf life of components Cost per test/Reagent cost per test	1 1 multi-use cartridge 6 months varies with size and menu	1 1 multi-use cartridge 6 months (cartridge) varies with cartridge size and menu/—	_ _ _
Calibrations required Calibration frequency Internal QC program recommended	automated continuous with iQM automated continuous with iQM internal, automated, continuous quality management	automated continuous with iQM automated continuous with iQM internal, automated, continuous quality management	2 point (automatic) automatic with each sample automatic electronic QC per 8 hours
QC features/Capabilities of QC features	included onboard Intelligent Quality Management/monthly report includes number of measurements, mean, maximum, and minimum delta values	included onboard Intelligent Quality Management/monthly report includes number of measurements, mean, maximum, and minimum delta values	L-J plots/statistical calculations, monthly cumulative reports (IDMS)
Remote control of device from laboratory System can use LOINC to transmit results to LIS	yes no	yes no	yes no
Specimen types suitable for device Acceptable anticoagulants/Sampling technique Sample size for complete panel of analyte results	whole blood, arterial, venous, or capillary heparin/aspiration 135–150 µL	whole blood, capillary, mixed venous, arterial, venous heparin/aspiration 150 µL, 95 µL (electrochemical only), 65 µL micro mode (electrochemical only)	whole blood, capillary, mixed venous, arterial, venous heparin, EDTA (glucose strip only)/injection 125 µL capillary, 200 µL syringe
Sample size differs with number of analytes selected Time from sample introduction to result availability	no 85 seconds	yes 70 seconds for electrochemical; 25 additional	no 60–90 seconds on average
Maximum No. of patient samples per hour/Maximum No. measured	20/180	seconds for CO-ox 20/300	25/175
results per hour Optimal throughput when analyzer calibrated, awaiting specimens	20 samples per hour	20 samples per hour	20 samples per hour
Calibration can be interrupted to perform stat sample Known interferences Sampler has self-wiping probe	yes — yes	yes interfering substance detected, operator notified yes	 no, not needed
Time required for maintenance by lab personnel	none (disposable cartridge)	none	none
Service center performs diagnostics through modem Method of analyst ID in system	no (but can through VPN) manual or bar-code entry of ID and password (customizable)	no (but can through VPN) wireless bar-code gun or manual virtual keyboard entry	no LCD touchscreen, numeric (customizable)
Instrument response for: • hardware failure/software failure • QC failure • calibration failure	operator warning, sampling lockout channel flagged no results for channel	operator warning, sampling lockout iQM disables analyte channel; no result reported system automatically performs checks before samples	EQC failure or screen prompt; software: screen prompt if QC required, no access to patient testing mode test ends–no injection of sample allowed
For what bar-code scanning is provided	operator and patient IDs, QC values	can be analyzed operator and patient IDs, cartridge lot number and expiration date	operator and patient IDs, cartridge information, lot number, quality control ranges
Built-in printer/Data port	yes/4 USB, 3 RS-232, 1 parallel, bar-code reader port, Ethernet	yes/4 RS-232, 1 parallel port, 1 Ethernet port, 4 USB ports	yes/RS-232, modem, Ethernet, LAN
Information listed on hard copy report	patient demographics, hospital name and address, results	patient demographics, hospital info, results, result flags and legend, reference and critical ranges (optional), comments, notification info	analyzer serial number, date, calibration successful, cal- ibration code, lot number, patient ID and temperature, results, barometric pressure, SW version optional: user ID, reference ranges, O2 therapy, sample information
Analyzer connections	GEMweb, GEMweb Plus, Impact for Critical Care	LIS/HIS via direct interface or GEMweb Plus Custom	data management system, which connects to LIS/
Interface standards supported How analyzer connects to external system to upload patient and QC results Information included in transmission from analyzer to external system	ASTM and HL7 protocols direct serial, Ethernet, modem dial-in device identifier, operator and patient IDs, results,	Connectivity; vendor-neutral or Web-based systems ASTM 1394, HL7 direct serial, hospital network, real-time wireless device identifier, operator and patient IDs, results,	HIS; directly to LIS/HIS (both options) IRMA (ASTM protocol), IDMS (script, HL7, or EDI) hospital network, direct serial, LAN device unique identifier, operator and patient IDs,
Hardware and software for data management system	QC ID and results GEMweb, GEMweb Plus, Impact for Critical Care	QC ID GEMweb Plus	results, QC identifier, patient O2 therapy information integrated data management system, also integrates ITC CO-oximetry and coagulation devices, connects
No. of different management reports system produces Contents downloaded from data management system to analyzer	customizable patient ID, demographics	4 most configuration information, including valid operator IDs, QC lots, and ranges	to MAS, Telcor, and Aegis POC data managers 24 all analyzer settings, software upgrades
System connected (live installations) to which LISs, HISs	major HIS/LIS vendors	major HIS/LIS vendors	major HIS/LIS vendors
Use a third-party interfacing tool, engine for LIS, HIS interfaces	MAS/RALS, Telcor	MAS/RALS, Telcor	yes
Distinguishing features (provided by company)	iQM detects, corrects, and documents instrument errors, reducing error detection time to minutes; maintenance-free, multi-use cartridge available in customizable configurations for use in any hospital location; wireless communication to LIS or HIS	iQM detects, corrects, documents instrument errors, re- ducing error detection time to minutes; single compo- nent, multi-use GEM Premier 4000 cartridge includes all testing components, is changed every 30 days, requires no refrigeration or maintenance; GEMweb Plus Custom Connectivity software allows access and control from	self-contained and easy to use; contains onboard printer, interactive touchscreen, bar-code scanning, automatic electronic QC, and site-specific custom correlation reference ranges; complete data management from patient information to lot traceability; self-calibrating cartridges with Luer lockport, which
Note: a dash in lieu of an answer means company did not answer question or question is not applicable		any networked PC or GEM Premier 4000 analyzer	forms a closed system and reduces biohazards

In vitro blood gas analyzers

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Part 3 of 8	Nova Biomedical Sales info@novabiomedical.com 200 Prospect St. Waltham, MA 02454-9141 800-458-5813	Nova Biomedical Sales info@novabiomedical.com 200 Prospect St. Waltham, MA 02454-9141 800-458-5813	Nova Biomedical Sales info@novabiomedical.com 200 Prospect St. Waltham, MA 02454-9141 800-458-5813
Name of device/First year sold/Number of analyzers sold in 2010	Stat Profile pH0x Basic/2002/—	Stat Profile pH0x/1998/—	Stat Profile pHOx Respiratory/2006/—
Number of devices sold in U.S./outside U.S./List price Dimensions (H x W x D)/Weight	- 15 × 12 × 15 inches/18 pounds	- 15 × 12 × 15 inches/18 pounds	- 15 × 12 × 15 inches/18 pounds
Analytes measured on device	pH, pC02, p02	pH, PCO2, PO2, Hct, Hb, SO2%	pH, PCO2, PO2, Hct, Hb, SO2%, lactate
Parameters calculated on device	BE, TC02, HC03-	BE, TC02, HC03-	BE, TC02, HC03-
Barometric pressure Analytical method(s) or technologies employed	tracked pH: direct ISE; PCO2: Severinghaus; PO2: amperometry	tracked pH: direct ISE; PCO2: Severinghaus; PO2: amperometry; Hct: conductivity; Hb and SO2%:	tracked pH: direct ISE; PCO2: Severinghaus; PO2: amperometry; Hct: conductivity; Hb and SO2%:
Device is part of a series of related models Device warranty/Loaner devices provided Average life expectancy of device	yes 1 year, repair or replace any part, including labor/yes 5–7 years	optical–reflectance yes 1 year, travel and labor, repair, or replacement/yes 5–7 years	optical–reflectance; lactate: enzyme/amperometric yes 1 year, travel and labor, repair, or replacement/yes 5–7 years
Open or closed system/External gas tanks required Categorized for point-of-care testing or laboratory	closed/no point-of-care testing and laboratory	closed/no point-of-care testing and laboratory	closed/no point-of-care testing and laboratory
Point of care: Disposable prepackaged system used for analysis No. of disposable reagent system units in standard package	reagent 200 to 500 analyses	reagent 200 to 500 analyses	reagent 200 to 500 analyses
No. of samples analyzed per one disposable reagent, electrode system Reagent unit storage requirements			
Shelf life of disposable units	reagents: 18 months at room temperature; electrodes: up to 18 months	reagents: 18 months at room temperature; electrodes: up to 18 months	reagents: 18 months at room temperature; electrodes: up to 18 months
Laboratory: No. of different disposable reagents required to maintain device	1	1	1
Max. No. of analyte reagents that can reside in device at once Shelf life of components	1	1 reagents and electrodes: 18 months; membrane kits:	1 reagents and electrodes: 18 months; membrane
Cost per test/Reagent cost per test	12 to 24 months <\$0.11 at 35 analyses per day/<\$0.08 at 35 analyses per day	12 to 24 months <\$0.11 at 35 analyses per day/<\$0.08 at 35 analyses per day	kits: 12 to 24 months <\$0.11 at 35 analyses per day/<\$0.08 at 35 analyses per day
Calibrations required Calibration frequency	1 and 2 point (automatic) 1 point: 30 or 45 minutes or with every sample (user selectable); 2 point: 2, 4, or 6 hours (user defined)	1 and 2 point (automatic) 1 point: 30 or 45 minutes or with every sample (user selectable); 2 point: 2, 4, or 6 hours (user defined)	1 and 2 point (automatic) 1 point: 30 or 45 minutes or with every sample (user selectable); 2 point: 2, 4, or 6 hours (user defined)
Internal QC program recommended QC features/Capabilities of QC features	minimum CLIA recommendations L-J plots/statistical calculations, monthly cumulative report (onboard, more extensive reporting available	minimum CLIA recommendations L-J plots/statistical calculations, monthly cumula- tive report (onboard, more extensive reporting avail-	minimum CLIA recommendations L-J plots/statistical calculations, monthly cumula- tive report (onboard, more extensive reporting
Remote control of device from laboratory System can use LOINC to transmit results to LIS	with Nova Point-of-Care Manager) no no	able with Nova Point-of-Care Manager) no no	available with Nova Point-of-Care Manager) no no
Specimen types suitable for device Acceptable anticoagulants/Sampling technique Sample size for complete panel of analyte results	whole blood, capillary, mixed venous, arterial heparin/aspiration and capillary 70 µL	whole blood, capillary, mixed venous, arterial heparin/aspiration and capillary 70 µL	whole blood, capillary, mixed venous, arterial heparin/aspiration and capillary 125 µL
Sample size differs with number of analytes selected Time from sample introduction to result availability	yes, standard three-test blood gas micro-panel sample required is 45 µL 45 seconds	yes, standard 3-test blood gas micro-panel sample required is 45 µL 45 seconds	yes, standard 3-test micro-panel required is 60 µL 52 seconds
Max. No. of patient samples per hour/Max. No. measured results per hour Optimal throughput when analyzer calibrated, awaiting specimens Calibration can be interrupted to perform stat sample	300/300 tests 300 tests per hour	300/300 tests 300 tests per hour	50/500 tests 300 tests per hour
Known interferences Sampler has self-wiping probe	yes — yes	yes yes	yes — yes
Time required for maintenance by lab personnel	weekly: <5 minutes; monthly: <10 minutes	weekly: <5 minutes; monthly: <10 minutes	weekly: <5 minutes; monthly: <10 minutes
Service center performs diagnostics through modem Method of analyst ID in system Instrument response for:	yes password with unique user ID number (optional)	yes password with unique user ID number (optional)	yes password with unique user ID number (optional)
hardware failure/software failure QC failure	self-diagnosis software informs and notifies operator of HW and SW failure; hotline and field support options range from flagging to not reporting test to lock-	self-diagnosis software informs and notifies operator of HW and SW failure; hotline and field support options range from flagging to not reporting test to lock-	self-diagnosis software informs and notifies operator of HW and SW failure; hotline and field support options range from flagging to not reporting test to lock-
calibration failure	out for QC failure or exceeding scheduled QC interval any test that does not calibrate will not report results	out for QC failure or exceeding scheduled QC interval any test that does not calibrate will not report results	out for QC failure or exceeding scheduled QC interval any test that does not calibrate will not report results
For what bar-code scanning is provided	and instrument notifies operator of reason for failure patient ID	and instrument notifies operator of reason for failure patient ID	and instrument notifies operator of reason for failure patient ID
Built-in printer/Data port	yes/multiple RS-232	yes/multiple RS-232	yes/multiple RS-232
Information listed on hard copy report	patient ID with accession number, entered settings, measures and calculates results	patient ID with accession number, entered settings, measures and calculates results	patient ID with accession number, entered settings, measures and calculates results
Analyzer connections	data-management system that connects to LIS/HIS	data-management system or directly to LIS/HIS, or both	data-management system or directly to LIS/HIS, or both
Interface standards supported	ASTM E1381-91 and ASTM 1394-91 (HL7 available	ASTM E1381-91 and ASTM 1394-91 (HL7 available	ASTM E1381-91 and ASTM 1394-91 (HL7 available
How analyzer connects to external system to upload patient and QC results	with external device) direct serial/>500 hospitals institutions; hospital	with external device) direct serial/>500 hospitals institutions; hospital	with external device) direct serial/>500 hospitals institutions; hospital
Information included in transmission from analyzer to external system	network/>100 institutions device-unique identifier, operator and patient IDs,	network/>100 institutions device-unique identifier, operator and patient IDs,	network/>100 institutions device-unique identifier, operator and patient IDs,
Hardware and software for data management system	results, QC identifier, accession number Pentium with Microsoft NT 4.0/Nova Point-of-Care Manager SW	results, QC identifier, accession number Pentium with Microsoft Windows 2000/Nova Point-of-Care Manager	results, QC identifier, accession number Pentium with Microsoft Windows 2000/Nova Point-of-Care Manager
No. of different management reports system produces Contents downloaded from data management system to analyzer	>60 —	>60 yes, patient name, passwords	>60 yes, patient name, passwords
System connected (live installations) to which LISs, HISs Use a third-party interfacing tool, engine for LIS, HIS interfaces	 yes	 yes	 yes
Distinguishing features (provided by company)	onboard auto-cartridge QC; all-liquid calibration cartridge eliminates gas tanks; single reagent cartridge has all supplies for calibration and waste collection	onboard auto-cartridge QC; all-liquid calibration cartridge eliminates gas tanks; single reagent cartridge has all supplies for calibration and waste collection	onboard auto-cartridge QC; all-liquid calibration cartridge eliminates gas tanks; single reagent cartridge has all supplies for calibration and waste collection

Note: a dash in lieu of an answer means company did not answer question or question is not applicable

Part 4 of 8	Nova Biomedical	Nova Biomedical	Nova Biomedical
	Sales info@novabiomedical.com 200 Prospect St.	Sales info@novabiomedical.com 200 Prospect St.	Sales info@novabiomedical.com 200 Prospect St.
	Waltham, MA 02454-9141 800-458-5813	Waltham, MA 02454-9141 800-458-5813	Waltham, MA 02454-9141 800-458-5813
Name of device/First year sold/Number of analyzers sold in 2010		Stat Profile pH0x Plus L/2001/—	Stat Profile pH0x Plus C/2003/—
Number of devices sold in U.S./outside U.S./List price	Stat Profile pH0x Plus/2000/—		
Dimensions (H x W x D)/Weight	$15 \times 12 \times 15$ inches/18 pounds	$15 \times 12 \times 15$ inches/18 pounds	$15 \times 12 \times 15$ inches/18 pounds
Analytes measured on device	pH, PCO2, PO2, Hct, Hb, SO2%, Na, K, Cl or iCa, glucose	pH, PCO2, PO2, Hct, Hb, SO2%, Na, K, Cl or iCa, glucose, lactate	pH, PCO2, PO2, Hct, Hb, SO2%, Na, K, Cl, iCa, glucose
Parameters calculated on device	BE, TC02, HC03-	BE, TCO2, HCO3-	BE, TCO2, HCO3-
Barometric pressure Analytical method(s) or technologies employed	tracked pH: direct ISE; PCO2: Severinghaus; PO2:	tracked pH: direct ISE; PCO2: Severinghaus; PO2:	tracked pH: direct ISE; PCO2: Severinghaus; PO2:
	amperometry; Hct: conductivity; Hb and S02%: optical-reflectance; Na, K, Cl, iCa: direct ISE;	amperometry; Hct: conductivity; Hb and SO2%: optical-reflectance; Na, K, Cl, iCa: direct ISE;	amperometry; Hct: conductivity; Hb and S02%: optical-reflectance; Na, K, CI, iCa: direct ISE;
	glucose: enzyme/amperometric	glucose, lactate: enzyme/amperometric	glucose: enzyme/amperometric
Device is part of a series of related models Device warranty/Loaner devices provided	yes 1 year, travel and labor, repair or replacement/yes	yes 1 year, travel and labor, repair or replacement	yes 1 year, travel and labor, repair or replacement
Average life expectancy of device Open or closed system/External gas tanks required	5–7 years closed/no	5–7 years closed/no	5–7 years closed/no
Categorized for point-of-care testing or laboratory	point-of-care testing and laboratory	point-of-care testing and laboratory	point-of-care testing and laboratory
Point of care:			
Disposable prepackaged system used for analysis No. of disposable reagent system units in standard package	reagent 200 to 500 analyses	reagent 200 to 500 analyses	reagent 200 to 500 analyses
No. of samples analyzed per one disposable reagent, electrode system Reagent unit storage requirements	room temperature	room temperature	room temperature
Shelf life of disposable units	reagents: 18 months at room temperature;	reagents: 18 months at room temperature;	reagents: 18 months at room temperature;
	electrodes: up to 18 months	electrodes: up to 18 months	electrodes: up to 18 months
Laboratory: No. of different disposable reagents required to maintain device	1	1	1
Max. No. of analyte reagents that can reside in device at once Shelf life of components	1 reagents and electrodes: 18 months; membrane kits:	1 reagents and electrodes: 18 months; membrane kits:	1 reagents and electrodes: 18 months; membrane kits:
· · · · · · · · · · · · · · · · · · ·	12 to 24 months	12 to 24 months	12 to 24 months
Cost per test/Reagent cost per test	<\$0.11 at 35 analyses per day/<\$0.08 at 35 analyses per day	<\$0.11 at 35 analyses per day/<\$0.08 at 35 analyses per day	<\$0.11 at 35 analyses per day/<\$0.08 at 35 analyses per day
Calibrations required	1 and 2 point (automatic)	1 and 2 point (automatic)	1 and 2 point (automatic)
Calibration frequency	1 point: 30 or 45 minutes or with every sample (user selectable); 2 point: 2, 4, or 6 hours (user defined)	1 point: 30 or 45 minutes or with every sample (user selectable); 2 point: 2, 4, or 6 hours (user defined)	1 point: 30 or 45 minutes or with every sample (user selectable); 2 point: 2, 4, or 6 hours (user defined)
Internal QC program recommended	minimum CLIA recommendations	minimum CLIA recommendations	minimum CLIA recommendations
QC features/Capabilities of QC features	L-J plots/statistical calculations, monthly cumulative report (onboard, more extensive reporting available	L-J plots/statistical calculations, monthly cumulative report (onboard, more extensive reporting available	L-J plots/statistical calculations, monthly cumulative report (onboard, more extensive reporting available
Remote control of device from laboratory	with Nova Point-of-Care Manager) no	with Nova Point-of-Care Manager) no	with Nova Point-of-Care Manager)
System can use LOINC to transmit results to LIS	no	no	no
Chastimon tunos quitable for device	whole blood, capillary, mixed venous, arterial	whole blood, capillary, mixed venous, arterial, serum	whole blood, capillary, mixed venous, arterial, serum
Specimen types suitable for device	whole blood, capillary, linked vehous, alterial		
Acceptable anticoagulants/Sampling technique	heparin/aspiration and capillary	plasma heparin/aspiration and capillary	plasma heparin/aspiration and capillary
		plasma	plasma
Acceptable anticoagulants/Sampling technique Sample size for complete panel of analyte results	heparin/aspiration and capillary 115 μL	plasma heparin/aspiration and capillary 125 µL	plasma heparin/aspiration and capillary 125 µL
Acceptable anticoagulants/Sampling technique Sample size for complete panel of analyte results Sample size differs with number of analytes selected Time from sample introduction to result availability Maximum No. of patient samples per hour/Maximum No. measured	heparin/aspiration and capillary 115 μL yes, micro-panel; standard 3-test micro-panel required is 55 μL	plasma heparin/aspiration and capillary 125 µL yes, standard 3-test micro-panel required is 60 µL	plasma heparin/aspiration and capillary 125 µL yes, standard 3-test micro-panel required is 60 µL
Acceptable anticoagulants/Sampling technique Sample size for complete panel of analyte results Sample size differs with number of analytes selected Time from sample introduction to result availability Maximum No. of patient samples per hour/Maximum No. measured results per hour Optimal throughput when analyzer calibrated, awaiting specimens	heparin/aspiration and capillary 115 μL yes, micro-panel; standard 3-test micro-panel required is 55 μL 50 seconds 50/500 tests 300 tests per hour	plasma heparin/aspiration and capillary 125 µL yes, standard 3-test micro-panel required is 60 µL 52 seconds 50/500 tests 300 tests per hour	plasma heparin/aspiration and capillary 125 µL yes, standard 3-test micro-panel required is 60 µL 52 seconds 50/500 tests 300 tests per hour
Acceptable anticoagulants/Sampling technique Sample size for complete panel of analyte results Sample size differs with number of analytes selected Time from sample introduction to result availability Maximum No. of patient samples per hour/Maximum No. measured results per hour Optimal throughput when analyzer calibrated, awaiting specimens Calibration can be interrupted to perform stat sample Known interferences	heparin/aspiration and capillary 115 μL yes, micro-panel; standard 3-test micro-panel required is 55 μL 50 seconds 50/500 tests 300 tests per hour yes	plasma heparin/aspiration and capillary 125 µL yes, standard 3-test micro-panel required is 60 µL 52 seconds 50/500 tests 300 tests per hour yes none	plasma heparin/aspiration and capillary 125 µL yes, standard 3-test micro-panel required is 60 µL 52 seconds 50/500 tests 300 tests per hour yes none
Acceptable anticoagulants/Sampling technique Sample size for complete panel of analyte results Sample size differs with number of analytes selected Time from sample introduction to result availability Maximum No. of patient samples per hour/Maximum No. measured results per hour Optimal throughput when analyzer calibrated, awaiting specimens Calibration can be interrupted to perform stat sample	heparin/aspiration and capillary 115 μL yes, micro-panel; standard 3-test micro-panel required is 55 μL 50 seconds 50/500 tests 300 tests per hour yes	plasma heparin/aspiration and capillary 125 µL yes, standard 3-test micro-panel required is 60 µL 52 seconds 50/500 tests 300 tests per hour yes	plasma heparin/aspiration and capillary 125 µL yes, standard 3-test micro-panel required is 60 µL 52 seconds 50/500 tests 300 tests per hour yes
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Acceptable anticoagulants/Sampling technique Sample size for complete panel of analyte results Sample size differs with number of analytes selected Time from sample introduction to result availability Maximum No. of patient samples per hour/Maximum No. measured results per hour Optimal throughput when analyzer calibrated, awaiting specimens Calibration can be interrupted to perform stat sample Known interferences Sampler has self-wiping probe	heparin/aspiration and capillary 115 μL yes, micro-panel; standard 3-test micro-panel required is 55 μL 50 seconds 50/500 tests 300 tests per hour yes yes	plasma heparin/aspiration and capillary 125 µL yes, standard 3-test micro-panel required is 60 µL 52 seconds 50/500 tests 300 tests per hour yes none yes	plasma heparin/aspiration and capillary 125 µL yes, standard 3-test micro-panel required is 60 µL 52 seconds 50/500 tests 300 tests per hour yes none yes
Acceptable anticoagulants/Sampling technique Sample size for complete panel of analyte results Sample size differs with number of analytes selected Time from sample introduction to result availability Maximum No. of patient samples per hour/Maximum No. measured results per hour Optimal throughput when analyzer calibrated, awaiting specimens Calibration can be interrupted to perform stat sample Known interferences Sampler has self-wiping probe Time required for maintenance by lab personnel Service center performs diagnostics through modem	heparin/aspiration and capillary 115 μL yes, micro-panel; standard 3-test micro-panel required is 55 μL 50 seconds 50/500 tests 300 tests per hour yes yes weekly: <5 minutes; monthly: <10 minutes yes password with unique user ID number (optional)	plasma heparin/aspiration and capillary 125 µL yes, standard 3-test micro-panel required is 60 µL 52 seconds 50/500 tests 300 tests per hour yes none yes weekly: <5 minutes; monthly: <10 minutes yes password with unique user ID number (optional)	plasma heparin/aspiration and capillary 125 μL yes, standard 3-test micro-panel required is 60 μL 52 seconds 50/500 tests 300 tests per hour yes none yes weekly: <5 minutes; monthly: <10 minutes yes password with unique user ID number (optional)
Acceptable anticoagulants/Sampling technique Sample size for complete panel of analyte results Sample size differs with number of analytes selected Time from sample introduction to result availability Maximum No. of patient samples per hour/Maximum No. measured results per hour Optimal throughput when analyzer calibrated, awaiting specimens Calibration can be interrupted to perform stat sample Known interferences Sampler has self-wiping probe Time required for maintenance by lab personnel Service center performs diagnostics through modem Method of analyst ID in system Instrument response for: • hardware failure/software failure	heparin/aspiration and capillary 115 μL yes, micro-panel; standard 3-test micro-panel required is 55 μL 50 seconds 50/500 tests 300 tests per hour yes yes weekly: <5 minutes; monthly: <10 minutes yes password with unique user ID number (optional) self-diagnosis software informs and notifies operator of HW and SW failure; hotline and field support	plasma heparin/aspiration and capillary 125 μL yes, standard 3-test micro-panel required is 60 μL 52 seconds 50/500 tests 300 tests per hour yes none yes weekly: <5 minutes; monthly: <10 minutes yes password with unique user ID number (optional) self-diagnosis software informs and notifies operator of HW and SW failure; hotline and field support	plasma heparin/aspiration and capillary 125 μL yes, standard 3-test micro-panel required is 60 μL 52 seconds 50/500 tests 300 tests per hour yes none yes weekly: <5 minutes; monthly: <10 minutes yes password with unique user ID number (optional) self-diagnosis software informs and notifies operator of HW and SW failure; hotline and field support
Acceptable anticoagulants/Sampling technique Sample size for complete panel of analyte results Sample size differs with number of analytes selected Time from sample introduction to result availability Maximum No. of patient samples per hour/Maximum No. measured results per hour Optimal throughput when analyzer calibrated, awaiting specimens Calibration can be interrupted to perform stat sample Known interferences Sampler has self-wiping probe Time required for maintenance by lab personnel Service center performs diagnostics through modem Method of analyst ID in system Instrument response for: • hardware failure/software failure • QC failure	heparin/aspiration and capillary 115 μL yes, micro-panel; standard 3-test micro-panel required is 55 μL 50 seconds 50/500 tests 300 tests per hour yes 	plasma heparin/aspiration and capillary 125 µL yes, standard 3-test micro-panel required is 60 µL 52 seconds 50/500 tests 300 tests per hour yes none yes weekly: <5 minutes; monthly: <10 minutes yes password with unique user ID number (optional) self-diagnosis software informs and notifies operator of HW and SW failure; hotline and field support options range from flagging to not reporting test to lock- out for QC failure or exceeding scheduled QC interval	plasma heparin/aspiration and capillary 125 μL yes, standard 3-test micro-panel required is 60 μL 52 seconds 50/500 tests 300 tests per hour yes none yes weekly: <5 minutes; monthly: <10 minutes yes password with unique user ID number (optional) self-diagnosis software informs and notifies operator of HW and SW failure; hotline and field support options range from flagging to not reporting test to lock- out for QC failure or exceeding scheduled QC interval
Acceptable anticoagulants/Sampling technique Sample size for complete panel of analyte results Sample size differs with number of analytes selected Time from sample introduction to result availability Maximum No. of patient samples per hour/Maximum No. measured results per hour Optimal throughput when analyzer calibrated, awaiting specimens Calibration can be interrupted to perform stat sample Known interferences Sampler has self-wiping probe Time required for maintenance by lab personnel Service center performs diagnostics through modem Method of analyst ID in system Instrument response for: • hardware failure/software failure • QC failure • calibration failure	heparin/aspiration and capillary 115 μL yes, micro-panel; standard 3-test micro-panel required is 55 μL 50 seconds 50/500 tests 300 tests per hour yes yes weekly: <5 minutes; monthly: <10 minutes yes password with unique user ID number (optional) self-diagnosis software informs and notifies operator of HW and SW failure; hotline and field support options range from flagging to not reporting test to lock- out for QC failure or exceeding scheduled QC interval any test that does not calibrate will not report results and instrument notifies operator of reason for failure	plasma heparin/aspiration and capillary 125 µL yes, standard 3-test micro-panel required is 60 µL 52 seconds 50/500 tests 300 tests per hour yes none yes weekly: <5 minutes; monthly: <10 minutes yes password with unique user ID number (optional) self-diagnosis software informs and notifies operator of HW and SW failure; hotline and field support options range from flagging to not reporting test to lock- out for QC failure or exceeding scheduled QC interval any test that does not calibrate will not report results and instrument notifies operator of reason for failure	plasma heparin/aspiration and capillary 125 μL yes, standard 3-test micro-panel required is 60 μL 52 seconds 50/500 tests 300 tests per hour yes none yes weekly: <5 minutes; monthly: <10 minutes yes password with unique user ID number (optional) self-diagnosis software informs and notifies operator of HW and SW failure; hotline and field support options range from flagging to not reporting test to lock- out for QC failure or exceeding scheduled QC interval any test that does not calibrate will not report results and instrument notifies operator of reason for failure
Acceptable anticoagulants/Sampling technique Sample size for complete panel of analyte results Sample size differs with number of analytes selected Time from sample introduction to result availability Maximum No. of patient samples per hour/Maximum No. measured results per hour Optimal throughput when analyzer calibrated, awaiting specimens Calibration can be interrupted to perform stat sample Known interferences Sampler has self-wiping probe Time required for maintenance by lab personnel Service center performs diagnostics through modem Method of analyst ID in system Instrument response for: • hardware failure/software failure • QC failure	heparin/aspiration and capillary 115 μL yes, micro-panel; standard 3-test micro-panel required is 55 μL 50 seconds 50/500 tests 300 tests per hour yes yes weekly: <5 minutes; monthly: <10 minutes yes password with unique user ID number (optional) self-diagnosis software informs and notifies operator of HW and SW failure; hotline and field support options range from flagging to not reporting test to lock- out for QC failure or exceeding scheduled QC interval any test that does not calibrate will not report results	plasma heparin/aspiration and capillary 125 µL yes, standard 3-test micro-panel required is 60 µL 52 seconds 50/500 tests 300 tests per hour yes none yes weekly: <5 minutes; monthly: <10 minutes yes password with unique user ID number (optional) self-diagnosis software informs and notifies operator of HW and SW failure; hotline and field support options range from flagging to not reporting test to lock- out for QC failure or exceeding scheduled QC interval any test that does not calibrate will not report results	plasma heparin/aspiration and capillary 125 μL yes, standard 3-test micro-panel required is 60 μL 52 seconds 50/500 tests 300 tests per hour yes none yes weekly: <5 minutes; monthly: <10 minutes yes password with unique user ID number (optional) self-diagnosis software informs and notifies operator of HW and SW failure; hotline and field support options range from flagging to not reporting test to lock- out for QC failure or exceeding scheduled QC interval any test that does not calibrate will not report results
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Acceptable anticoagulants/Sampling technique Sample size for complete panel of analyte results Sample size differs with number of analytes selected Time from sample introduction to result availability Maximum No. of patient samples per hour/Maximum No. measured results per hour Optimal throughput when analyzer calibrated, awaiting specimens Calibration can be interrupted to perform stat sample Known interferences Sampler has self-wiping probe Time required for maintenance by lab personnel Service center performs diagnostics through modem Method of analyst ID in system Instrument response for: • hardware failure/software failure • QC failure • calibration failure For what bar-code scanning is provided Built-in printer/Data port Information listed on hard copy report Analyzer connections Interface standards supported How analyzer connects to external system to upload patient and QC results	heparin/aspiration and capillary 115 μL yes, micro-panel; standard 3-test micro-panel required is 55 μL 50 seconds 50/500 tests 300 tests per hour yes 	plasma heparin/aspiration and capillary 125 µL yes, standard 3-test micro-panel required is 60 µL 52 seconds 50/500 tests 300 tests per hour yes none yes weekly: <5 minutes; monthly: <10 minutes yes password with unique user ID number (optional) self-diagnosis software informs and notifies operator of HW and SW failure; hotline and field support options range from flagging to not reporting test to lock- out for QC failure or exceeding scheduled QC interval any test that does not calibrate will not report results and instrument notifies operator of reason for failure patient ID yes/multiple RS-232 patient ID with accession number entered settings, measures and calculates results data-management system or directly to LIS/HIS, or both ASTM E1381-91 and ASTM 1394-91 (HL7 available with external device) direct serial/>500 hospitals institutions; hospital network/>100 institutions device unique identifier, operator and patient IDs, results, QC identifier, accession number	plasma heparin/aspiration and capillary 125 µL yes, standard 3-test micro-panel required is 60 µL 52 seconds 50/500 tests 300 tests per hour yes none yes weekly: <5 minutes; monthly: <10 minutes yes password with unique user ID number (optional) self-diagnosis software informs and notifies operator of HW and SW failure; hotline and field support options range from flagging to not reporting test to lock- out for QC failure or exceeding scheduled QC interval any test that does not calibrate will not report results and instrument notifies operator of reason for failure patient ID yes/multiple RS-232 patient ID with accession number entered settings, measures and calculates results data-management system or directly to LIS/HIS, or both ASTM E1381-91 and ASTM 1394-91 (HL7 available with external device) direct serial/>500 hospitals institutions; hospital network/>100 institutions device unique identifier, operator and patient IDs, results, QC identifier, accession number
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August 2011

In vitro blood gas analyzers

	In vitro blood gas		
Part 5 of 8	Nova Biomedical Sales info@novabiomedical.com 200 Prospect St., Waltham, MA 02454-9141 800-458-5813	Nova Biomedical Sales info@novabiomedical.com 200 Prospect St., Waltham, MA 02454-9141 800-458-5813	Opti Medical Systems Inc. Sales Department 235 Hembree Park Drive, Roswell, GA 30076 800-490-6784 www.optimedical.com
Name of device/First year sold/Number of analyzers sold in 2010 Number of devices sold in U.S./outside U.S./List price Dimensions (H x W x D)/Weight	Stat Profile Critical Care Xpress/2003/— — 17.2 \times 22.4 \times 17.3 inches/53 pounds	Stat Profile Critical Care Xpress 3 Plus/2003/— $-$ 17.2 \times 22.4 \times 17.3 inches/53 pounds	OPTI R/2006/— — 4.7 × 14.2 × 14 inches/4.5 kg (10 pounds) without fluid pack
Analytes measured on device Parameters calculated on device	pH, pCO2, pO2, Hct, Hb, Na, K, Cl, iCa, iMg, lactate, glucose, creatinine, BUN, SO2%, bilirubin, CO-oximetry BE, TCO2, HCO3-	pH, pCO2, pO2, CO-oximetry BE, TCO2, HCO3-	pH, pCO2, pO2, tHb, Na, K, iCa, SO2 Hct, HCO3, BE, BEecf, BEact, BB, tCO2, st. HCO3, st. pH, O2ct, cH+, AaDO2, AG, p50, nCa++
Barometric pressure Analytical method(s) or technologies employed	tracked pH: direct ISE; pCO2: Severinghaus; pO2: amperometric; Hct: conductivity; Hb and SO2%: optical-reflectance; Na, K, Cl, iMg, and iCa: direct ISE; lactate, glucose, and creatinine: enzyme/amperometric; BUN: enzyme/ISE; bilirubin, CO-ox: optical, reflectance	tracked pH: direct ISE; pCO2: Severinghaus; pO2: amperometric; CO-ox: optical-reflectance	measured optical fluorescence and reflectance
Device is part of a series of related models Device warranty/Loaner devices provided	yes 1 year	yes 1 year/yes	yes, Opti series 1 year (service contract available for subsequent years)/yes
Average life expectancy of device Open or closed system/External gas tanks required Categorized for point-of-care testing or laboratory	5–7 years closed/no point-of-care testing and laboratory	5–7 years closed/no point-of-care testing and laboratory	7 years closed/no point-of-care testing and laboratory
Point of care: Disposable prepackaged system used for analysis No. of disposable reagent system units in standard package No. of samples analyzed per one disposable reagent, electrode system	reagent 200–500 analyses —	reagent 200–500 analyses —	reagent/multi-use cartridge 4 50
Reagent unit storage requirements Shelf life of disposable units	no special requirements reagents: 18 months (at room temperature); electrodes: up to 18 months	no special requirements reagents: 18 months (at room temperature); electrodes: up to 18 months	room temperature cassette: 7 months; fluid pack: 12 months
Laboratory: No. of different disposable reagents required to maintain device Max. No. of analyte reagents that can reside in device at once	1 20	1 7	2 8 2 constant of the development of the sector of the sec
Shelf life of components Cost per test/Reagent cost per test	reagents and electrodes: 18 months; membrane kits: 12–24 months <\$0.08 at 40 analyses per day/\$0.04 at 40 analyses per day	reagents and electrodes: 18 months; membrane kits: 12–24 months <\$0.08 at 40 analyses per day/\$0.04 at 40 analyses per day	cassette: 7 months; fluid pack: 12 months depends on volume
Calibrations required Calibration frequency	1 and 2 point (automatic) 1 point: 30 or 45 minutes or with every sample (user selectable); 2 point: 2, 3, 4, 5, or 6 hours	1 and 2 point (automatic) 1 point: 30 or 45 minutes or with every sample (user selectable); 2 point: 2, 3, 4, 5, or 6 hours (user defined)	2 point (automatic) 1 point: after every sample or 30 minutes; 2 point: every 3 hours
Internal QC program recommended	(user defined) minimum CLIA recommendations	minimum CLIA recommendations	minimum CLIA recommendations; auto QC can be programmed to meet requirements —/auto QC, statistics reports
QC features/Capabilities of QC features Remote control of device from laboratory	L-J plots/statistical calculations, monthly cumulative report (onboard, more extensive reporting available with Nova Point-of-Care Manager) no	L-J plots/comparable plot, statistical calculations, monthly cumulative report, onboard, available with external system no	/auto QC, statistics reports
System can use LOINC to transmit results to LIS	yes	yes	yes
Specimen types suitable for device	whole blood, capillary, mixed venous, arterial, venous	whole blood, capillary, mixed venous, arterial, venous	plasma, serum, whole blood
	whole blood, capillary, mixed venous, arterial,	-	-
Specimen types suitable for device Acceptable anticoagulants/Sampling technique Sample size for complete panel of analyte results Sample size differs with number of analytes selected Time from sample introduction to result availability Maximum No. of patient samples per hour/Maximum No. measured results per hour	whole blood, capillary, mixed venous, arterial, venous heparin/aspiration and capillary 210 µL yes, variety of micro-panel options offered and can be customized 134 seconds 22/440	whole blood, capillary, mixed venous, arterial, venous heparin/aspiration and capillary 210 µL yes, variety of micro-panel options offered and can be customized 61 seconds 32/224	plasma, serum, whole blood heparin/aspiration and capillary 125 µL no ~1 minute 24/192
Specimen types suitable for device Acceptable anticoagulants/Sampling technique Sample size for complete panel of analyte results Sample size differs with number of analytes selected Time from sample introduction to result availability Maximum No. of patient samples per hour/Maximum No. measured results per hour Optimal throughput when analyzer calibrated, awaiting specimens Calibration can be interrupted to perform stat sample Known interferences	whole blood, capillary, mixed venous, arterial, venous heparin/aspiration and capillary 210 μL yes, variety of micro-panel options offered and can be customized 134 seconds 22/440 437 tests per hour yes none	whole blood, capillary, mixed venous, arterial, venous heparin/aspiration and capillary 210 µL yes, variety of micro-panel options offered and can be customized 61 seconds 32/224 190 tests per hour yes none	plasma, serum, whole blood heparin/aspiration and capillary 125 µL no ~1 minute 24/192 24 per hour no —
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Specimen types suitable for device Acceptable anticoagulants/Sampling technique Sample size for complete panel of analyte results Sample size differs with number of analyte selected Time from sample introduction to result availability Maximum No. of patient samples per hour/Maximum No. measured results per hour Optimal throughput when analyzer calibrated, awaiting specimens Calibration can be interrupted to perform stat sample Known interferences Sampler has self-wiping probe Time required for maintenance by lab personnel Service center performs diagnostics through modem Method of analyst ID in system Instrument response for: • hardware failure/software failure	whole blood, capillary, mixed venous, arterial, venous heparin/aspiration and capillary 210 μL yes, variety of micro-panel options offered and can be customized 134 seconds 22/440 437 tests per hour yes none yes weekly: <5 minutes; monthly: <10 minutes yes multilevel password with unique user ID number self-diagnosis software informs and notifies operator of HW and SW failure; hotline and field support options range from flagging to not reporting test to lockout for QC failure or exceeding scheduled QC	whole blood, capillary, mixed venous, arterial, venous heparin/aspiration and capillary 210 µL yes, variety of micro-panel options offered and can be customized 61 seconds 32/224 190 tests per hour yes none yes weekly: <5 minutes; monthly: <10 minutes yes multilevel password with unique user ID number self-diagnosis software informs and notifies operator of HW and SW failure; hotline and field support options range from flagging to not reporting test to lockout for QC failure or exceeding scheduled QC	plasma, serum, whole blood heparin/aspiration and capillary 125 µL no ~1 minute 24/192 24 per hour no
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Tabulation does not represent an endorsement by the College of American Pathologists.

Part 6 of 8	Opti Medical Systems Inc. Sales Department 235 Hembree Park Drive, Roswell, GA 30076 800-490-6784 www.optimedical.com	Radiometer America Inc. Telesales Department info@radiometeramerica.com 810 Sharon Drive, Westlake, OH 44145 800-736-0600 www.radiometeramerica.com	Radiometer America Inc. Telesales Department info@radiometeramerica.com 810 Sharon Drive, Westlake, OH 44145 800-736-0600 www.radiometeramerica.com
Name of device/First year sold/Number of analyzers sold in 2010 Number of devices sold in U.S./outside U.S./List price Dimensions (H x W x D)/Weight	OPTI CCA-TS Blood Gas Analyzer/2003/— — 4.7 × 14.2 × 9 inches/12 pounds (10 lbs w/o battery)	ABL90 FLEX/2010 in U.S./— —/—/\$40,000 17.7 × 9.8 × 11.4 inches/24 pounds	ABL 800 Series/2004/— —/—/depends on configuration 22 × 28 × 21 inches/70 pounds
Analytes measured on device Parameters calculated on device	pH, pCO2, pO2, Na, K, Cl, iCa, tHb, SO2, glucose, BUN, lactate Hct, HCO3, BE, BEecf, BEact, BB, tCO2, st. HCO3, st.	pH, pCo2, pO2, Hb, Na, K,Cl, iCa, lactate, glucose, sO2, tHb, FO2Hb, FCOHb, FMetHb, FHHb, FHbF Hct, BE, TCO2, HCO3, and 44 additional parameters	pH, pCO2, pO2, Hb, Na, K, Cl, iCa, lactate, glucose, biliru- bin, fetal Hb, O2Hb, MetHb, RHb, COHb, O2SAT, creatinine Hct, BE, TCO2, HCO3-, plus 40 additional parameters
Barometric pressure Analytical method(s) or technologies employed	pH, 02ct, cH+, AaD02, AG, p50, nCa++ measured optical fluorescence and reflectance	recorded, measured pH, iCa, pCO2, lactate, glucose, Na, Cl, K: thick film, potentiometric analysis; pO2: optical phosphores- cence; Hct: calculation; Hb: multi-wavelength CO-ox	measured pH: pH-sensitive glass (ISE); pCO2, pO2, Na, Cl, iCa, K, ISE; Hct: calculated from measuring Hb, bilirubin; Hb: optical, multiwavelength analysis, intra-cuvette
Device is part of a series of related models Device warranty/Loaner devices provided	yes, Opti series 1 year (service contract available for subsequent years)/yes	spectrophotometric analysis no 1 year (parts, labor, and travel) with service plans available after year one/yes	ultrasonic hemolysis, and more yes, ABL 800 series 2 years, parts, labor, and travel/yes
Average life expectancy of device Open or closed system/External gas tanks required Categorized for point-of-care testing or laboratory	>7 years closed/no point-of-care testing and laboratory	10+ years closed/no point-of-care testing and laboratory	20 years, with full support closed/yes (low-pressure, premixed) point-of-care testing and laboratory
Point of care: Disposable prepackaged system used for analysis No. of disposable reagent system units in standard package No. of samples analyzed per one disposable reagent, electrode system Reagent unit storage requirements Shelf life of disposable units	single-use cassettes 25 individual packaged cassettes 1 room temperature cassette: 6–12 months, depends on type	reagent, electrode (multiuse cartridge) 1 100, 300, 600, 900 small SC only needs refrigeration reagent/electrode system: four months	- - - -
Laboratory: No. of different disposable reagents required to maintain device Max. No. of analyte reagents that can reside in device at once Shelf life of components	1 8 cassette: 6–8 months, depends on type	2 all reagent and sensor cartridge: four months	4 4 reagent, electrode, membrane kit, cartridge: 2+ years
Cost per test/Reagent cost per test	depends on volume	depends on configuration/depends on configuration	depends on sample volume and any extra included items/same
Calibrations required Calibration frequency	1 point (automatic) with each cassette	1 and 2 point (manual and automatic) 1 point with each sample analysis; 2 point every 8 hours (user configurable)	1 and 2 point (automatic) 1 point: 1/2 hour BG/pH, 4 hours—manufacturer; 2 point: every 8 hours
Internal QC program recommended QC features/Capabilities of QC features	minimum CLIA recommendations; electronic QC can be used for daily QC requirements —/electronic QC, statistics reports	standard QC according to CAP, CLIA, JCAHO guide- lines; user configurable for increased QC frequency L-J plots, comparable plot via DMS/auto QC (statistical calculations, monthly cumulative reports, on board and through DMS)	depends on hospital management and inspection agency L-J plots/comparable plot (via DMS), statistical calcs., automatic QC, monthly cumulative reports (onboard and available with external system)
Remote control of device from laboratory System can use LOINC to transmit results to LIS	no yes	yes	yes yes
Specimen types suitable for device	plasma, serum, whole blood	whole blood, capillary, mixed venous, arterial,	whole blood, capillary, mixed venous, arterial,
Acceptable anticoagulants/Sampling technique	heparin/aspiration and capillary	venous heparin, electrolyte-balanced heparin/aspiration,	venous, expired air heparin, electrolyte-balanced heparin/autoaspira-
Sample size for complete panel of analyte results Sample size differs with number of analytes selected	125 µL —	auto aspiration, capillary, test tube, micro-sample 65 μL no	tion, syringe and/or capillary tube and/or test tube 95 μ L for 17 measured parameters yes, with fewer measured parameters, smaller
Time from sample introduction to result availability Maximum No. of patient samples per hour/Maximum No. measured results per hour	~1 minute from sample aspiration 24/192	35 seconds 50/800	micro-modes available from 35 µL ~1 minute (depends on tests ordered) 25/425
Optimal throughput when analyzer calibrated, awaiting specimens Calibration can be interrupted to perform stat sample Known interferences	24 per hour no	800 tests (equals 50 patient samples) yes —	25 per hour yes halothane, thiocyanic and glycolic acids
Sampler has self-wiping probe	no, single use	yes	yes
Time required for maintenance by lab personnel Service center performs diagnostics through modem Method of analyst ID in system	weekly: 1 minute; quarterly: 5 minutes no bar code or secure PIN for 300 operators	monthly: as needed — customizable user log-ons, bar code, on-board	monthly: as needed; annually: dependent on version yes customizable onboard keyboard, bar code
Instrument response for: • hardware failure/software failure	error message	keyboard; built-in bar code scanner system message; traffic light; audible, visual signals,	system message with customized ("traffic light")
• QC failure	QC lockout	parameter bar traffic light; self-correcting when possible same as hardware/software failure	visual and audible signals, parameter status bar —
calibration failure For what bar-code scanning is provided	error message operator and patient IDs, reagent, QC	same as hardware/software failure operator and patient IDs; uses smart-chips for reagents, no scanning needed	 operator and patient IDs, reagent and QC lot numbers, expiration, software keys
Built-in printer/Data port Information listed on hard copy report	yes/RS-232, Ethernet patient ID, results, patient demographics (customized), critical ranges	yes/RS-232, parallel, Ethernet, others patient information and demographics, patient therapy settings, measured and calculated results, system messages, reference and critical values, analyzer set-up and configuration, and more	yes/RS-232, Ethernet/USB patient information/demographics, patient therapy settings, measures and calculates results, system messages, reference and critical ranges
Analyzer connections Interface standards supported	directly to LIS/HIS, DMS that in turn connects to LIS/HIS, Prism POC data manager ASTM, ASCII	directly to LIS/HIS; LIS/HIS, via data management system ASTM 1394, HL7, serial, POCT1-A, network, TCP/IP	RADIANCE stat information management system that connects to LIS/HIS or directly to LIS/HIS ASTM, HL7, serial, POCT1A, network TCP/IP
How analyzer connects to external system to upload patient and QC results	direct serial, Ethernet hospital network	direct serial, hospital network	direct serial/thousands of hospitals installed; mo- dem dial-in/hundreds; hospital network/hundreds;
Information included in transmission from analyzer to external system	device-unique identifier, operator and patient IDs, results, QC identifier, all information pertinent to	device-unique identifier, operator and patient IDs, results, QC identifier, calibration and analyzer status	real-time wireless-capable device-unique identifier, operator and patient IDs, results, QC identifier, per ASTM/HL7 standards plus collination and applying status information
Hardware and software for data management system	patient and QC data Prism POC data manager	internal system and external: RADIANCE and all other DMS systems	calibration and analyzer status information internal system plus optional external system, RADIANCE
No. of different management reports system produces Contents downloaded from data management system to analyzer System connected (live installations) to which LISs, HISs Use a third-party interfacing tool, engine for LIS, HIS interfaces	40 — Meditech, McKesson, Cerner, Siemens, others —	standard and user definable reports valid operator IDs Cerner, McKesson, Meditech, Sunquest, many others no (an interfacing tool/engine could be used)	user-definable searches/reports — Cerner, Meditech, Misys, others —
Distinguishing features (provided by company) Note: a dash in lieu of an answer means company did not answer question	stable optical fluorescence technology, easy-to-use touchscreen, measured tHb and SO2, no standby costs (single-use system), low maintenance	fast results (35 seconds on 65 uL sample with 44–55 per hour throughput); easy to use: walk-up ready; one-handed operation with integrated user guides and no user maintenance; automatic quality management supports regulatory compliance requirements, performs continuous checks and	IDMS-traceable creatinine; FLEXQ automated inlet part of automatic system; bilirubin and fetal Hb measured on whole blood with no extra sample volume, low maintenance and cost of operation
or question is not applicable		corrective actions are performed automatically	

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Part 7 of 8	Radiometer America Inc.Telesales Department10 Sharon Dr., Westlake, OH 44145800-736-0600www.radiometeramerica.com	Roche Diagnostics Tonya Sullivan tonya.sullivan@roche.com 9115 Hague Rd., Indianapolis, IN 46256 800-428-5076 www.mylabonline.com	Siemens Healthcare Diagnostics Inc. 1717 Deerfield Road Deerfield, IL 60015-0778 800-255-3232 www.siemens.com/diagnostics
Name of device/First year sold/Number of analyzers sold in 2010	ABL80/2006/—	Roche cobas b 221 system/2004/—	RAPIDPoint 500 system (in development, not for sale in the U.S.)/2011/—
Number of devices sold in U.S./outside U.S./List price Dimensions (H x W x D)/Weight	—/—/depends on configuration $16 \times 9 \times 11$ inches/19 pounds	$\underline{}$ 23 \times 20 \times 23.6 inches/99 pounds (without solutions and AutoQC)	$\frac{1}{21.5 \times 11.5 \times 16}$ inches/36.5 pounds
Analytes measured on device	pH, pCO2, pO2, Hct, Na, K, iCa, Cl-, Glu, Hb, O2SAT, O2Hb, COHb, MetHb, HHb	pH, pCO2, pO2, Hct, Hb, Na, K, Cl, iCa, lactate, glucose, BUN, bilirubin, pH pleural fluid	pH, pCO2, pO2, Hb, Na, K, Cl, iCa, glucose, neonatal total bilirubin (pending clearance), CO-oximeter fractions (fO2Hb, fCOHb, fMetHb, fHHb)
Parameters calculated on device	Hb, O2SAT, TCO2, HCO3-, ctO2 (a-v), ctO2, anion gap (K+), cCa2+ (7.40), cBase (B), ABE, SBE, others	Hb, Hct, O2SAT, BE, TCO2, HCO3-	02SAT, BE, TCO2, HCO3
Barometric pressure Analytical method(s) or technologies employed	pH, pCO2, pO2, Na, K, iCa, Cl, Glu: thick film; amperometric/potentiometric technology; HCT: conductivity	recorded or measured pH: electrode ion-selective galvanometric; pCO2, pO2: electrode ion selective membrane; Hct: conductiv- ity; Hb: CO-ox spectrophotometry; Na, CI, iCa, K: ion selective potentiometry; lactate, glucose, BUN: MSS sensor enzyme	recorded pH, iCa, Na, CI, K: potentiometry using ISE; pCO2: potentiometry based on severinghaus; pO2: amperometric; glucose: amperometric, glucose oxidase; Hb: spectrophotometric
Device is part of a series of related models Device warranty/Loaner devices provided	yes 1 year, parts, labor, and travel, with service plans available after year 1/yes	yes, three models in series 1 year (parts and services warranty)/no	no 1 year/yes
Average life expectancy of device Open or closed system/External gas tanks required Categorized for point-of-care testing or laboratory	analyzer: 10+ years closed/no point-of-care testing and laboratory	7 years closed/no point-of-care testing and laboratory	7–10 years closed/no point-of-care testing and laboratory
Point of care: Disposable prepackaged system used for analysis No. of disposable reagent system units in standard package	electrode (multi-use cartridge) 1	reagent and electrode depends on model, contact Roche	multi-use cartridge 1 measurement and 1 wash-waste cartridge; 1 AQC cartridge
No. of samples analyzed per one disposable reagent, electrode system Reagent unit storage requirements	50/100/200/300 room temperature	dependent on use room-temperature storage	250, 400, 750 samples measurement and AQC cartridge: refrigeration;
Shelf life of disposable units	90–100 days	12 months (reagents)/18 months (electrodes)	wash/waste cartridge: room temperature 9 months
Laboratory: No. of different disposable reagents required to maintain device	2	depends on model, contact Roche	1 measurement and 1 wash-waste cartridge; 1 AQC cartridge
Max. No. of analyte reagents that can reside in device at once	2	3	1 measurement and 1 wash-waste cartridge; 1 AQC cartridge
Shelf life of components Cost per test/Reagent cost per test	reagent: 100 days, cartridge: 90 days depends on configuration/same	reagent: 1 year; electrode: 18 months onboard volume-dependent/volume-dependent	cartridge: 9 months —
Calibrations required Calibration frequency	1 and 2 point (manual and automatic) 1 point: with each test; 2 point: 8 hours	1 and 2 point (automatic) 1 point: 30 minutes; two point: 8 hours	1 and 2 point (manual and automatic) one point: 30 minutes; two point: 2 hours
Internal QC program recommended QC features/Capabilities of QC features	(user definable) QC material according to CLIA, CAP, JCAHO L-J plots/statistical calculations, monthly cumulative (onboard–current mean, STD, CV%) reports (onboard and available with external system,	CAP and JCAHO guidelines L-J plots/comparable plot, lot-to-lot comparisons, statistical calculations, monthly cumulative reports, onboard, eQAP	1 AQC cartridge; fully user programmable L-J plots/external RAPIDComm Data Management, statistical calculations, monthly cumulative reports
Remote control of device from laboratory System can use LOINC to transmit results to LIS	PC download to Excel) yes yes	yes yes	yes no
Specimen types suitable for device Acceptable anticoagulants/Sampling technique	whole blood, capillary, mixed venous, arterial, venous heparinized, electrolyte balanced heparin/aspiration	plasma, serum, whole blood, capillary, arterial, venous EDTA, heparin, citrate/aspiration, injection, capillary transfer and fill, microsamples	whole blood, capillary, mixed venous, arterial, venous heparin/aspiration
Sample size for complete panel of analyte results Sample size differs with number of analytes selected	70 μL no	200 μL for full panel yes, BG: 40 μL; ISE: 40 μL; CO-ox 44 μL, glucose, lactate, BUN: 75 μL	100 µL minimum no
Time from sample introduction to result availability Maximum No. of patient samples per hour/Maximum No. measured	90 seconds 30/270	~1 minute (test dependent) 30/360	~60 seconds 25/up to 325
results per hour Optimal throughput when analyzer calibrated, awaiting specimens Calibration can be interrupted to perform stat sample Known interferences	30 tests per hour yes —	30 patients per hour (full panel) yes —	25 samples per hour yes benzalkonium
Sampler has self-wiping probe	no	yes	yes
Time required for maintenance by lab personnel Service center performs diagnostics through modem		daily: 2 minutes, monthly: 5 minutes, quarterly: 5 minutes yes	monthly: 1-minute cartridge replacement
Method of analyst ID in system Instrument response for:	customizable onboard keyboard, bar code	32-level password system (customizable)	password (customizable)
 hardware failure/software failure QC failure 	system message with customized ("traffic light") visual and audible signals, parameter status bar —	HW: identified onscreen and with diagnostic routine; SW: onscreen with messages onscreen report with high/low flagging, lockout	diagnostic codes/diagnostic codes fully customizable flags
• calibration failure For what bar-code scanning is provided	 operator and patient IDs, reagent and QC lot	capabilities onscreen reporting with lockout capabilities operator and patient IDs, reagent lot number, RF with	diagnostic codes operator and patient IDs
Built-in printer/Data port Information listed on hard copy report	numbers, expiration, software keys yes/RS-232, Ethernet/USB patient information/demographics, patient therapy settings, measures and calculates results, system messages, reference and critical ranges	transponders, expiration yes/RS-232, parallel, Ethernet options can be customized; direct and measured parameters	yes/RS-232, Ethernet operator and patient IDs, accession number, patient measured and calculated results, temperature, more
Analyzer connections	Radiance stat analyzer management system that connects to LIS/HIS or directly to LIS/HIS	cobas bge link, data management systems, LIS or HIS	directly to LIS/HIS, data management system, which connects to LIS/HIS
Interface standards supported How analyzer connects to external system to upload patient and QC results Information included in transmission from analyzer to external system	ASTM, HL7, serial, network, TCP/IP serial, Ethernet device-unique identifier, operator and patient IDs, results, QC identifier	ASTM, HL7, USB port Ethernet device-unique identifier, operator and patient IDs, results, QC identifier	LIS3 direct serial, Ethernet device-unique identifier, operator and patient IDs, results, QC identifier
Hardware and software for data management system	Radiance	cobas bge link	RAPIDComm Data Management system
No. of different management reports system produces Contents downloaded from data management system to analyzer	user definable —	13 base reports, unlimited customized reports valid operator IDs	fully customizable valid control values and operator IDs
System connected (live installations) to which LISs, HISs Use a third-party interfacing tool, engine for LIS, HIS interfaces	Cerner, Meditech, Misys, others no (use interface templates)	Cerner, Meditech, others Data Innovations	Ξ
Distinguishing features (provided by company)	portable, true battery operation; fast startup/ warmup and analysis time; simple and easy-to-use system	FDA-510(k)-cleared pH pleural fluid results; 42-day onboard reagent packs; Roche AutoQC with up to 40 days of QC covered; screen sharing and remote pro- tected access with cobas bge link and Axeda software	no maintenance, multi-use cartridge; fast time to patient results and sample to sample throughput; 28-day, onboard, automatic quality control cartridge

In vitro blood gas analyzers

August 2011

	In vitro blood gas	o analyzel 3	
Part 8 of 8	Siemens Healthcare Diagnostics Inc. 1717 Deerfield Road Deerfield, IL 60015-0778 800-255-3232 www.siemens.com/diagnostics	Siemens Healthcare Diagnostics Inc. 1717 Deerfield Road Deerfield, IL 60015-0778 800-255-3232 www.siemens.com/diagnostics	Siemens Healthcare Diagnostics Inc. 1717 Deerfield Road Deerfield, IL 60015-0778 800-255-3232 www.siemens.com/diagnostics
Name of device/First year sold/Number of analyzers sold in 2010	RAPIDPoint 300 Series/2009/	RAPIDPoint 400 Series/2001/—	RAPIDLab 1200 Series/2005/—
Number of devices sold in U.S./outside U.S./List price Dimensions (H x W x D)/Weight	$\frac{12.5 \times 14.5 \times 7 \text{ inches/16-17 pounds}}{12.5 \times 14.5 \times 7 \text{ inches/16-17 pounds}}$	$\frac{1}{21.5 \times 11.5 \times 16}$ inches/34 pounds	
Analytes measured on device	pH, pCO2, pO2, Hct, Na+, K+, Cl-, iCa++	pH, pCO2, pO2, Hct, Na+, K+, Cl-, Ca++, tHB, FO2Hb, FCOHb, FMetHb, FHHb, glucose	pH, pCO2, pO2, tHb, Na+, K+, Cl-, iCa++, lactate, glucose, FO2Hb, FCOHb, FMetHb, FHHb, total neonatal
Parameters calculated on device	Hb, 02SAT, BE, TCO2, HCO3	HC03-act, HC03-std, BE(B), BE(ecf), ctC02, Ca++(7.4), RI(T), 02SAT, P02/FI02, AnGAP, s02, B02, p02(A-a)(T), p02(a/A)(T), p50, Qsp/Qt(T), ct02(Hb), ct02(a), ct02(v), ct02(V), ct02(a-v), D02, V02, others	bilirubin HC03-act, HC03-std, BE(B), BE(ecf), ctC02, Ca++(7.4), RI(T), 02SAT, P02/FI02, AnGAP, s02, B02, p02(A-a)(T), p02(a/A)(T), p50, Qsp/Qt(T), ct02(Hb), ct02(a), ct02(v), ct02(V), ct02(a-v), D02, V02, others
Barometric pressure Analytical method(s) or technologies employed	recorded, measured pH: ISE-potentiometry; iCa: ISE; PCO2: ISE-potenti- ometry; pO2: ISE-amperometry; Hct: conductivity; Hb: calculated from hematocrit; Na: ISE; CI: ISE; K: ISE	recorded pH, Na, Cl, iCa, K: potentiometry using ISE; pCO2: potentiometry based on Severinghaus; pO2: amperometric meas. (Clark); glucose: amperometric- glucose oxidase; Hct: conductivity; CO-oximetry: spectrophotometric	measured, tracked pH: potentiometry; pCO2: Severinghaus electrochemical; pO2: amperometric; Hct: calculated; tHb: spectrophotometric; Na, Cl, iCa, K: ISE; lactate: lactate oxidase; glucose: glucose oxidase; total neonatal bilirubin: spectrophotometric
Device is part of a series of related models	yes, two models: RAPIDPoint 340 offers blood gas; RAPIDPoint 350 offers blood gas, electrolytes, and hematocrit	yes	yes, series offers different analyte options
Device warranty/Loaner devices provided Average life expectancy of device	1-year warranty (country specific)/yes 7–10 years	1 year/yes 7–10 years	1 year/no 7–10 years
Open or closed system/External gas tanks required	closed/no	closed/no	closed/no
Categorized for point-of-care testing or laboratory	laboratory	point-of-care testing and laboratory	point-of-care testing and laboratory
Point of care: Disposable prepackaged system used for analysis No. of disposable reagent system units in standard package No. of samples analyzed per one disposable reagent, electrode system Reagent unit storage requirements	multi-use cartridge 1 based on daily testing volumes room temperature	multi-use cartridge 1 measurement and 1 wash-waste cartridge 250, 400, 750 samples refrigeration	multi-use cartridges, electrode measurement chamber 1 reagent cartridge, 1 wash cartridge Reagent cartridge is not sample dependent Reagent cartridge/AQC cartridge-refrigeration; wash
Shelf life of disposable units	reagents: 7 to 9 months; electrodes: 12 months	9 months	cartridge–room temperature reagent/wash cartridge: 8 months; AQC cartridge: 9 months; electrodes: varies based on type
Laboratory: No. of different disposable reagents required to maintain device Max. No. of analyte reagents that can reside in device at once Shelf life of components	1 1 reagents: 7–9 months; electrodes: 12 months	1 measurement cartridge, 1 wash-waste cartridge 1 measurement cartridge, 1 wash-waste cartridge 9 months	1 reagent cartridge, 1 wash cartridge 1 reagent cartridge, 1 wash cartridge, all electrodes electrodes: vary based on type; reagent cartridge: 8 months; wash cartridge: 8 months; AQC cartridge:
Cost per test/Reagent cost per test	varies based on configuration and test volume/—	varies based on configuration	9 months varies based on configuration
Calibrations required	1 and 2 point (manual and automatic)	1 and 2 point (automatic)	1 and 2 point (manual and automatic)
Calibrations required Calibration frequency	1 point (with each sample); 2 point (can be set to 2-, 4-, or 8-hour increments)	1 and 2 point (automatic) 1 point: 30 minutes; 2 point: 2 hours	1 point: every 30 minutes; 2 point: every 8 hours
Internal QC program recommended	one-level QC every 8 hours of testing (CLIA recommendation): Siemens QC material recommended	AQC cartridge, fully user programmable	AQC cartridge, fully user programmable
QC features/Capabilities of QC features	L-J plots/statistical calculations, monthly cumulative reports, onboard	AQC cartridge, L-J plots/comparable plots, statistical calculations, monthly cumulative reports (available with external system)	L-J plots/comparable plots, statistical calculations, monthly cumulative reports (available with external system)
Remote control of device from laboratory System can use LOINC to transmit results to LIS	no no	yes no	yes no
Specimen types suitable for device	whole blood, capillary, mixed venous, arterial,	whole blood, capillary, mixed venous, arterial,	whole blood, capillary, mixed venous, arterial,
Acceptable anticoagulants/Sampling technique Sample size for complete panel of analyte results	venous heparin/aspiration 75 µL/95 µL capillary (RP340/RP350) 100 µL/120 µL syringe (RP340/RP350)	venous heparin/aspiration 100 µL	venous heparin/aspiration 95–175 µL
Sample size differs with number of analytes selected Time from sample introduction to result availability Maximum No. of patient samples per hour/Maximum No. measured	syning (nr 340/nr 350) no 125 seconds (RP340), <120 seconds (RP350) 25 samples (RP340), 30 samples (RP350)/75 (RP340),	no 60 seconds 25/—	yes (microsample mode available) 60 seconds 24/up to 336 tests
results per hour Optimal throughput when analyzer calibrated, awaiting specimens	210 (RP350) 25 samples per hour (RP340), 30 samples per hour	25 samples per hour	24 samples per hour
Calibration can be interrupted to perform stat sample	(RP350) yes	yes	yes
Known interferences Sampler has self-wiping probe	certain anticoagulants yes	benzalkonium yes	 yes
Time required for maintenance by lab personnel Service center performs diagnostics through modem Method of analyst ID in system	daily: <1 minute no	none no	weekly: 5 minutes; monthly: 5 minutes no
Instrument response for:	manual or bar-code entry (optional)	password (customizable)	password (customizable)
hardware failure/software failure QC failure calibration failure	operator warning, error messages sampling lock-out, flagged high or low QC results automatic calibration repeat, error messages, blank	flag-prompt customizable-flag flag–recalibration	diagnostic codes prompt the operator diagnostic codes recalibrates, generates diagnostic code if
For what bar-code scanning is provided	screen display operator identifier, patient identifier, and reagent lot number	operator and patient IDs, accession number results,	unsuccessful patient ID
Built-in printer/Data port Information listed on hard copy report	number yes/RS-232 patient information, operator ID, measured and calculated results, date	temperature, other information yes/RS-232, Ethernet operator and patient IDs, accession number results, temperature, other information	yes/RS-232, Ethernet operator and patient IDs, accession number, results, temperature, patient demographics, others
Analyzer connections	directly to LIS/HIS	data management system, which connects to LIS/	temperature, patient demographics, others data management system, which connects to LIS/
Interface standards supported How analyzer connects to external system to upload patient and QC results	ASTM 1394 and E1381 direct serial	HIS; directly to LIS/HIS (both options) LIS 3 direct serial, hospital network	HIS; directly to LIS/HIS (both options) LIS 4 direct serial, hospital network
Information included in transmission from analyzer to external system	operator ID, patient ID, results	device-unique identifier, operator and patient IDs,	device-unique identifier, operator and patient IDs,
Hardware and software for data management system No. of different management reports system produces Contents downloaded from data management system to analyzer System connected (live installations) to which LISs, HISs	internal data management patient reports, QC statistics, L-J charts —	results, QC identifier RapidComm Data Management System customizable valid control values, valid operator IDs	results, QC identifier RapidComm Data Management System customizable valid control values, valid operator IDs
Use a third-party interfacing tool, engine for LIS, HIS interfaces Distinguishing features (provided by company)	no multi-use cartridge-based system eliminates gas tanks; no maintenance, easy-to-replace electrodes; small, portable, and economical; dialysate fluid testing application in select countries	yes no maintenance, multi-use cartridge; fast time to patient results; onboard audio-video training videos; auto QC	yes cartridge-based high-throughput analyzer with minimal maintenance; fast time to patient results; onboard troubleshooting tutorials