Hematology analyzers

Hematology analyzers: an overview of what's new

Brendan Dabkowski

Putting their money where their market is, companies in CAPTODAY's hematology analyzers product guide are introducing systems to meet growing test demands and the need for enhanced functionality.

"Automated hematology systems with advanced, clinically relevant parameters that can potentially impact treatment guidelines, care pathways, patient flow, and return on investment are essential," says Alan Burton, director of marketing, hematology, at Sysmex America. To this end, Sysmex added to its product lineup the XT-4000i automated hematology analyzer. The XT-4000i provides 34 parameters, including immature granulocyte and reticulocyte hemoglobin. It has a body fluid-specific mode that provides a reportable RBC count, WBC count, WBC differential, and total count for all common body fluid samples. The system, Burton says, can run 100 samples per hour and uses fluorescent flow cytometry, hydrodynamic focusing, and advanced cell-counting methods to deliver rapid results. The XT-4000i can be used with the company's Work Area Manager decision support software, he adds, to improve sample and data workflow and decrease turnaround time.

Sysmex recently launched its cell image analysis portfolio (not featured in the product guide), which includes the CellaVision DM1200 and DM96 systems for mid-size to large hematology laboratories and the Medica EasyCell Assistant for smaller hematology labs.

Abbott Hematology has added to its hematology program two software packages—V3 and V4—for the company's Cell-Dyn Sapphire hematology analyzer, says Bill Bailey, U.S. marketing manager, hematology. Both software bundles allow Sapphire users to troubleshoot problems and receive updates remotely through Abbott-Link, which, he says, translates to improved reliability and increased uptime for high-volume hematology labs.

Abbott launched in June the Pathfinder sample management system. The product, says Bailey, combines "process management, Cell-Dyn instrument technology, comprehensive middleware, and logical sample management to reduce manual steps and optimize technologist efficiency and productivity."

Finally, Siemens Healthcare Diagnostics recently introduced additional automated body fluid-specific applications to its Advia 2120i system to complement the company's cerebrospinal fluid assay. Automating these labor-intensive assays allows laboratories to better balance rising work volumes with decreasing staffing, says Fred Stelling, director of global hematology marketing. Looking to the future, Siemens is focusing on integrating hematology results and other lab data into a "wider network of intelligent information management," he says.

CAP TODAY's guide to hematology analyzers includes products from the aforementioned manufacturers and from Beckman Coulter and Horiba Medical. Companies supplied the information listed. Readers interested in a particular system should confirm it has the stated features and capabilities.

Brendan Dabkowski is CAP TODAY associate editor.

	Part 1 of 14	Abbott Hematology Rick Gooch rick.gooch@abbott.com 5440 Patrick Henry Dr. Santa Clara. CA 95054
		800-933-5535 www.abbottdiagnostics.com
	Name of instrument First year installed in U.S./outside U.S./No. of units sold in 2009 No. units installed in U.S./outside U.S./List price	CELL-DYN Sapphire* 2005/2005/ >175/>750/\$250,000
	Test menu: • Chartable (standard menu: WBC, RBC, Hb, Hct, MCV, MCH, MCHC, PLT, %&# neut, mono, lymph, eos, baso): • Laboratory	standard menu (left) plus: MPV, RDW, retic %&#, IRF, NRBC %&#, CD61, CD3T %&#, CD4T %&#, CD8T %&#, 4/8 —</td></tr><tr><th></th><td>Flags FDA-cleared tests but not clinically released</td><td>band, IG, blast, variant lymph, nvWBC, rstRBC, IR, PLT clmp, ASYM, FP, CD61 agglutination, clot detected during aspiration, short sample —</td></tr><tr><th></th><th>Tests not available but submitted for clearance</th><th>_</th></tr><tr><th></th><td>For research use only Tests unique to analyzer</td><td> CD61 for PLTs, CD3/4, CD3/8 (immuno T-cell)</td></tr><tr><th></th><th>Differential method(s) used</th><th>MAPSS (Multi-Angle Polarized Scatter Separation) and three-color fluorescence</th></tr><tr><th></th><th>Linearity: • WBC count (10⁹/L)/RBC count (10¹²/L) • Hemoglobin (g/dL)/platelet (10⁹/L) • MCV (fL) or Het (%)</th><th>0.4–250.0 × 10³ μL/ 0.22–7.50 × 10⁶ μL 1.0–24.8 g/dL/11.0–2,000.0 × 10³ μL 37 0–179 fl (MCV)</th></tr><tr><th></th><th>Precision: • WBC count/RBC count • Hemoglobin/nlatelet</th><th><pre>2.7 percent/<1.5 percent <1.0 percent/<4.0 percent</pre></th></tr><tr><th></th><th>MCV or Hct Accuracy of automated differential compared with manual</th><th>Site percent (MCV) neut% r=0.942 slope 0.947 v=0.446; lvm% r=0.936 slope=0.943 v=2.811; mono%</th></tr><tr><th></th><td>differential (per CLSI H-20A), regression equation</td><td>r=0.623 slope=1.057 y=0.851; eos r=0.446 slope=1.024 y=0.288; baso% r=0.232 slope=0.257 y=0.350 PLT clumps, neutronbil agreenates, HbC crystals, lyse-resistant BBCs</td></tr><tr><th></th><td></td><td>cryoglobulin, cryofibrinogen, fragmented WBC, NRBC</td></tr><tr><th></th><td>• KBC</td><td>autoaggiutination, cold aggiutinins, elevated WBC, glant PLTs, hemolysis, sm WBC autoaggiutination, cold aggiutining, elevated WBC, giant PLT, hemolysis,</td></tr><tr><th></th><td>• MOV OF HCL • Platelet</td><td>Autoaggiutination, cold aggiutinins, elevated wbc, giant PLI, neniolysis, hyperglycemia auto and cold anglutination, cryoglobulin, cryofibringgen, giant PLT micro RBC</td></tr><tr><th></th><td>- Huttict</td><td>PLT clumps, RBC fragments, WBC fragments, PLT satellitism</td></tr><tr><th></th><td>Hemoglobin</td><td>lipids>700 mg/dL, WBCs>250 \times 109/L, bilirubin>33 mg/dL, HbC crystals</td></tr><tr><th></th><td>Interfering substances: differential</td><td>see WBC</td></tr><tr><th>-</th><th>Ana- and say-spacific reference ranges</th><th>Job</th></tr><tr><th></th><td>Maximum CBCs per hour/Maximum CBCs and differentials per hour Recommended average frequency of calibration</td><td>105/105 six months verification</td></tr><tr><th></th><th>Modes calibrated/parameters calibrated Froguency of blood/latex controls</th><th>open-closed single procedure/WBC, RBC Hb, MCV, PLT, MPV</th></tr><tr><th></th><th>Minimum specimen volume open/closed/Sample dead volume closed</th><th>120 μL/120 μL/0.5 mL, 0.3 mL for 10.25×64 mm tubes vec (11 5-13 × 65-75 mm 10 25 × 64 mm 8.5 × 66 mm [Sarsterft Monovertia])</th></tr><tr><th></th><td>Veterinary capability Microsample canability</td><td>yes (11.3–15 × 65-75 mm, 10.25 × 64 mm, 6.5 × 66 mm [5813teut Monoverte]) No Ves</td></tr><tr><th></th><td>Prepares microscopic slides automatically or flags problems for slide prep If automatic slidemaker available, No. installed/list price</td><td>no —/\$125,000</td></tr><tr><th>ŀ</th><th>Archives patient data for later comparison</th><th>yes</th></tr><tr><th></th><th>Patient-specific archiving Maximum archived data accessible when system online</th><th>yes 10,000 results</th></tr><tr><th></th><th>Memory capacity—numeric results-No. specimens Memory capacity—histo/cytograms-No. specimens</th><th>10,000 results 10,000 results</th></tr><tr><th></th><td>Stored in conjunction with CBC data Histo/cytogram images and CBC data printed as one report Sound results can be preceded and extra printed.</td><td>yes yes</td></tr><tr><th></th><th>Saved results can be recarded and retrainsmitted Saved data can be sorted for reprocessing or report transmission Performs data shocks</th><th>yes yes</th></tr><tr><th></th><td>Tags and holds results for followup, confirmatory testing, or rerun Parameters for flags for holding samples are defined by</td><td>yes yes user or vendor</td></tr><tr><th></th><td>Some results can be transmitted to LIS while others held Scatteruram display: cell-snecific color</td><td>yes</td></tr><tr><th></th><td>Histogram display: color with threshold Choice of desired specimen and/or result information displayed</td><td>yes yes</td></tr><tr><th></th><th>LIS interface formats supported Information transferred on LIS interface</th><th>ASTM 1394 numeric and flag results, instrument to LIS; patient demographics, patient orders LIS to instrument—broadcast: host query for patient demographics and orders</th></tr><tr><th></th><th>LOINC codes transmitted with results</th><th>no</th></tr><tr><th></th><th>How labs get LOINC codes for reagent kits Optional data management or collation system</th><th>yes</th></tr><tr><th></th><th>Software features</th><th>enhanced QC, data archiving, data collation from multiple instruments, remote viewing</th></tr><tr><th></th><td>Interface available or planned to automate specimen-handling system Bar-code symbologies read on tube</td><td>none Codabar, codes 39 and 128, interleaved 2 of 5</td></tr><tr><th></th><th>Accommodates bar-code placement per CLSI standard Auto2A</th><th>yes</th></tr><tr><th></th><th>Time required for maintenance by lab personnel Onboard maintenance records</th><th>daily: 30 seconds; weekly: 10 minutes; monthly: 5 minutes</th></tr><tr><th></th><th>Time from communication of problem to engineer on site Onboard diagnostics/limited to software problems Manufacturer can perform diagnostics via modem</th><th>yes/no ves</th></tr><tr><th>ŀ</th><th>Acquisition program based on cost-per-reportable result</th><th>no</th></tr><tr><th>ŀ</th><th>Distinguishing features (supplied by company)</th><th>four optical and three fluorescent detectors provide multiple scatterplot analysis;</th></tr><tr><th></th><th></th><th>2-D optical platelets avoid interferences; fluorescent analysis of reticulocytes, NRBCs, and three-color monoclonal analysis on routine hematology analyzer; OpenFlow MAb test selections *please see the CELL-DYN Sapphire operator's manual for product labeling.</th></tr></tbody></table>

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

including warnings, limitations, and precautions

Hematology analyzers

Part 2 of 14	Abbott Hematology Rick Gooch rick.gooch@abbott.com 5440 Patrick Henry Dr. Santa Clara, CA 95054 800-933-5535 www.abbottdiagnostics.com	Abbott Hematology Karen Busch karen.busch@abbott.com 5440 Patrick Henry Dr. Santa Clara, CA 95054 800-933-5535 www.abbottdiagnostics.com
Name of instrument First year installed in U.S./outside U.S./No. of units sold in 2009 No. units installed in U.S./outside U.S./List price	CELL-DYN Ruby* 2006/2006/— >350/>850/\$185,000	CELL-DYN Emerald* 2009/2008/0 >500/>200/\$30,000
Test menu: • Chartable (standard menu: WBC, RBC, Hb, Hct, MCV, MCH, MCHC, PLT, percent&# neut, mono, lymph, eos, baso): • Laboratory • Flags	standard menu (left) plus: MPV, RDW, retic #& percent 	WBC, RBC, Hb, Hct, MCV, MCH, MCHC, PLT, lymph percent&#, gran percent&#, mid percent&#, RDW, MPV — dispersional data alerts. suspect measurand flags and count invalidation flags</td></tr><tr><td>FDA-cleared tests but not clinically released Tests not available but submitted for clearance Tests in development</td><td>MCHC, LRI, URI, LURI, ATYPDEP, high/low interp. message, WBC — — —</td><td></td></tr><tr><td>For research use only Tests unique to analyzer</td><td></td><td>none</td></tr><tr><td>Differential method(s) used Linearity: • WBC count (10⁹/L)/RBC count (10¹²/L) • Hemoglobin (g/dL)/platelet (10⁹/L) • MCV (fL) or Hct (percent) Precision: • WBC count/RBC count • Hemoglobin/platelet • MCV or Hct Accuracy of automated differential compared with manual</td><td>$\label{eq:mapping} \begin{array}{l} MAPSS (Multi-Angle Polarized Scatter Separation) \\ 0.02-246 \times 10^3/\mu L/0.00-7.50 \times 10^6/\mu L \\ 0.00-25.0 \ g/d L/0.00-3,000 \times 10^3/\mu L \\ 58-139 \ fL: (MCV) \\ 2.4 \ percent/1.8 \ percent \\ 1.4 \ percent/3.8 \ percent \\ 0.8 \ percent (MCV) \\ neut \ percent \ r=0.983, \ slope=0.97, \ y=-1.98; \ lymph \ r=0.921, \ slope=0.95, \ y=0.94; \end{array}$</td><td>impedance counting 0.4–96.1 K/µL/0.22–7.61 M/µL 3.3–24.6 g/dL/9–1,375 K/uL 5.3–75.6 percent (Hct)/48.8–115 fL (MCV) 3.5 percent (95 percent confidence limit)/2.0 percent (95 percent confidence limit) 2.1 percent (95 percent confidence limit)/6.1 percent (95 percent confidence limit) 1.7 percent Hct (95 percent confidence limit)/0.8 percent MCV (95 percent confidence limit) —</td></tr><tr><td>differential (per CLSI H-20A), regression equation Interfering substances: • WBC</td><td>mono r=0.711, slope=1.10, y=1.93; eos r=0.952, slope=1.04, y=0.01; baso r=0.146, slope=0.18, y=1.22 fragile WBC, neutrophil aggregates, lytic-resistant RBC, NRBC, PLT clumps, cryofibrinogen, cryoglobulin</td><td>cryoglobulin, cryofibrinogen, heparin, monoclonal proteins, nucleated red cells, platelet clumping, unlysed red cells, clotting, smudge cells, uremia plus</td></tr><tr><td>• RBC • MCV or Het</td><td>elevated WBC, increased numbers of giant PLT, autoagglutination, in vitro hemolysis MCV: elevated WBC, hyperalycemia, in vitro hemolysis, increased number of</td><td>immunosuppressants cryoglobulin, cryofibrinogen, giant platelets, high white cell count (>50,000 K/ μL), autoagglutination, clotting, hemolysis (in vitro), microcytic red cells cryoglobulin, cryofibrinogen, giant platelets, high white cell count (>50,000 K/</td></tr><tr><td>• Platelet</td><td>giant PLTs WBC fragments, in vitro hemolysis, microcytic RBC, cryofibrinogen, groupbuling, PLT clumping increased number of start PLT</td><td>μL) hyperglycemia (>600 mg/dL), autoagglutination, clotting, hemolysis (in vitro), microcytic red cells, reduced red cell deformability, swollen red cells cryoglobulin, cryofibrinogen, hemolysis (in vivo and in vitro), microcytic red cells red cell indusions with cell formation and in vitro), microcytic red</td></tr><tr><td>• Hemoglobin</td><td>cryoglobulins, PLI clumping, increased number of glant PLI elevated WBC, increased plasma substances (triglycerides, bilirubin, in vivo hemolysis), lytic-resistant RBC</td><td>cells, red cell inclusions, white cell tragments, clotting, giant platelets, neparin, platelet clumping, platelet satellitosis carboxyhemoglobin (>10 percent), cryoglobulin, cryofibrinogen, hemolysis (in vivo) heparin, high white cell count (>50,000 K/µL), hyperbilirubinemia, lipemia,</td></tr><tr><td>Interfering substances: differential</td><td>fragile WBC, neutrophil aggregates, lytic-resistant RBC, NRBC, PLT clumps, cryofibrinogen, cryoglobulin, paraproteins</td><td>monoclonal proteins platelet aggregates, NRBCs, giant platelets, cryoglobulins, incomplete lysis of RBC, small lymphocytes, fibrin clots, shift in WBC cell distribution due to EDTA anticoagulant equilibration</td></tr><tr><td>Age- and sex-specific reference ranges Maximum CBCs per hour/Maximum CBCs and differentials per hour Recommended average frequency of calibration</td><td>yes 84/84 six months verification</td><td>yes 60/60 scheduled calibration of the CELL-DYN Emerald must conform to the guidelines</td></tr><tr><td> Modes calibrated/parameters calibrated Frequency of blood/latex controls Minimum specimen volume open/closed/Sample dead volume closed Tube sampling supported Veterinary capability </td><td>open or closed/WBC, RBC, Hgb, MCV, PLT, MPV per local regulatory requirements/— 150 μL/230 μL/1.2 mL yes (13 × 75 mm) no</td><td>open mode, as system has only one mode/WBC, RBC, HGB, MCV, PLT per regulatory requirement/— 9.8 µL/—/— yes (open mode) no</td></tr><tr><td>Microsample capability Prepares microscopic slides automatically or flags problems for slide prep If automatic slidemaker available, No. installed/list price</td><td>no no —/\$125,000</td><td></td></tr><tr><td>Archives patient data for later comparison Patient-specific archiving Maximum archived data accessible when system online Memory capacity—numeric results–No. specimens Memory capacity—histo/cytograms–No. specimens • Stored in conjunction with CBC data • Histo/cytogram images & CBC data printed as one report Saved results can be recalled and retransmitted Saved data can be sorted for reprocessing or report transmission Performs delta checks Tags and holds results for followup, confirmatory testing, or rerun Parameters for flags for holding samples are defined by Some results can be transmitted to LIS while others held Scattergram display: color with threshold Choice of desired specimen and/or result information displayed</td><td>yes yes 10,000 results 10,000 results yes yes yes yes yes no yes user or vendor yes yes yes yes yes</td><td>yes no 60,000 on USB and 1,500 results on internal memory 60,000 on USB and 1,500 results on internal memory 90,000 on USB and 1,500 results on internal memory yes yes yes yes no no no no no no no no no no no no no</td></tr><tr><td>LIS interface formats supported Information transferred on LIS interface</td><td>LIS1/LIS2 CLSI numeric and flag results, histograms and scatterplots, instrument to LIS; patient demographics, patient orders, LIS to instrument—broadcast; host query for patient demographics and orders</td><td>proprietary (instrument or vendor specific) numeric and flag results, instrument to LIS</td></tr><tr><td>LOINC codes transmitted with results How labs get LOINC codes for reagent kits Optional data management or collation system • Software features Interface available or planned to automate specimen-handling system Bar-code symbologies read on tube</td><td>no yes enhanced QC, data archiving, data collation from multiple instruments Codabar, codes 39 and 128, interleaved 2 of 5, ISBT</td><td>no — no — Codabar, codes 39 and 128, interleaved 2 of 5, Chinese post, code 93, EAN8, EAN13, EAN128, IATA, industrial 2 of 5, Italian pharmaceutical, matrix 2 of 5</td></tr><tr><td>Accommodates bar-code placement per CLSI standard Auto2A</td><td>yes</td><td>MSI/Plessey, UK/Plessey, Telepen, TriOptic, S-Code, UPC A, UPC E yes</td></tr><tr><td>Time required for maintenance by lab personnel Onboard maintenance records Time from communication of problem to engineer on site Onboard diagnostics/limited to software problems Manufacturer can perform diagnostics via modem</td><td>daily: 30 seconds; weekly: 5 minutes; monthly: 10 minutes yes — yes/no yes</td><td>daily: 3 minutes; monthly: 5 minutes; bi-annually: 10 minutes yes dependent upon service contract no/no no</td></tr><tr><td>Acquisition program based on cost-per-reportable result</td><td>no</td><td>по</td></tr><tr><td>Distinguishing features (supplied by company)</td><td>touch-sensitive screen, all optical technology; onboard maintenance videos; lyse-resistant RBC mode; rules-based result annotations *please see the CELL-DYN Ruby operator's manual for product labeling.</td><td>small: sample size, reagent volumes used, and physical size; reliable: system averages one service call per year; easy to use: system has touchscreen software with intuitive icons and minimal layers *please see the CELL-DYN Emerald operator's manual for product labeling.</td></tr><tr><td>Note: a dash in lieu of an answer means company did not answer question or question is not applicable</td><td>including warnings, limitations, and precautions</td><td>including warnings, limitations, and precautions</td></tr></tbody></table>

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

December 2010

Part 3 of 14	Abbott Hematology Rick Gooch rick.gooch@abbott.com 5440 Patrick Henry Dr. Santa Clara. CA 95054	Beckman Coulter Jim Cureton jdcureton@beckman.com 250 So. Kraemer Blvd Brea. CA 92821	
	800-933-5535 www.abbottdiagnostics.com	714-961-4942 www.beckmancoulter.com	
Name of instrument First year installed in U.S./outside U.S./No. of units sold in 2009 No. units installed in U.S./outside U.S./List price	CELL-DYN 3700* 1999/1999/— >200/>1,500/\$180,000 SL Model, \$140,000 CS Model	UniCel DxH 800 2008/2008/2 30/20/\$219,000 or \$229,000 with floor stand	
Test menu: • Chartable (standard menu: WBC, RBC, Hb, Hct, MCV, MCH, MCHC, PLT, %&# neut, mono, lymph, eos, baso):	standard menu (left) plus: RDW, MPV, retic #&%, IRF	standard menu (left) plus: RDW-CV, RDW-SD, MPV, retic#, retic%, IRF, MRV, NRBC# and %, body fluids-total nucleated count, and RBC count for synovial, serous, and CSF fluids.	
Laboratory Flags EDA closes but not clinically released	— suspect populations, band, blast, variant lymph, IG, NRBC, RRBC, NWBC, LRI, URI, LURI, RBC morphology, FWBC, high/low interpretation message, WBC	— definitive, suspect and system messages, user-definable extended decision rules, ISLH consensus rules, user-definable differential sensitivity	
Tests not available but submitted for clearance	_	_	
For research use only	Ξ	— high light scatter reticulocytes (HLR% and HLR#), low hemoglobin density (LHD), microcytic anemia factor (MAF), mean sphered cell volume (MSCV), plateletcrit (PCT), platelet distribution width (PDW), reticulocyte distribution width (RDWR-CV and RDWR-SD), red cell size factor (RSF), cell population data	
Tests unique to analyzer	IRF, veterinary capabilities**	research parameters	
Differential method(s) used	MAPSS (Multi-Angle Polarized Scatter Separation)	flow cytometric digital analysis using volume, conductivity, and five angles of light scatter, digital signal processing, advanced algorithm applications, high- definition cellular resoluton, DataFusion	
Linearity: • WBC count (10 ⁹ /L)/RBC count (10 ¹² /L) • Hemoglobin (g/dL)/platelet (10 ⁹ /L)	0–250 K/μL/0–8 M/μL 0–24 g/dL/0–2,000 K/μL	0–400/0–8.5 0–25.5/0–3,000	
MCV (fL) or Hct (%) Precision: WBC count/RBC count	50–200 fL (MCV) <2.5 percent/<1.5 percent	50–150 ≤3.0 percent/≤1.5 percent	
• Hemoglobin/platelet • MCV or Hct	≤1.2 percent/≤5.0 percent ≤1.0 percent (MCV)	≤1.5 percent/ ≤3.5 percent ≤1.0 percent	
Accuracy of automated differential compared with manual differential (per CLSI H-20A), regression equation	neut #&%: ≥0.95, —; lymph #&%: ≥0.94, —; mono #&%: ≥0.86, —; eos #&%: ≥0.84, —; baso #&%: ≥0.73, —	NE = ± 2.0 ; LY, MO = ± 3.0 ; EO,BA = ± 1.0 (or 10% percent, whichever is greater), 	
Interfering substances: • WBC • RBC	NRBCs (WIC only), lytic-resistant RBCs, PLT clumps, cryoglobulin and cryofibrinogen, fragile WBCs	precipitated elevated proteins, cryoglobulin, fragmented white cells, agglutinated white cells, lyse-resistant red cells, giant platelets, platelet clumps, unlysed particles >35 fL in size very binh WBC count, binh concentration of very large platelets.	
• MCV or Het	MCV: elevated WBC count, increased number niant PLTs, hypernlycemia, in vitro	autoagglutination yery high WBC count, high concentration of very large platelets	
• Platelet	hemolysis WRC fragments in vitro bemolysis microcytic RRCs cryoglobulin PLT	autoagglutination natelet clumps white cell fragments very small red cells red cell fragments	
• Hemoglobin	clumps, increased number giant PLTs increased plasma substances (triglycerides, bilirubin, in vivo hemolysis).	severe lipemia, heparin, certain unusual RBC abnormalities that resist lysing	
Interfering substances: differential	lyse-resistant RBCs see WBC	elevated triglycerides, precipitated elevated proteins	
Age- and sex-specific reference ranges	Ves	Ves	
Maximum CBCs per hour/Maximum CBCs and differentials per hour Recommended average frequency of calibration	90/90 six months verification	>100 per hour/>100 per hour two times per vear or per regulatory reguirements	
Modes calibrated/parameters calibrated Frequency of blood/latex controls	open and closed/WBC, RBC, Hb, MCV, PLT as per regulatory reguirement/—	CBC/RBC, WBC, Hgb, MCV, PLT, MPV	
Minimum specimen volume open/closed/Sample dead volume closed Tube sampling supported	130 µL/355 µL/1.0 mL ves (13 × 75 mm)	165 μL/165 μL/300–400 μL ves (variety of sizes)	
Veterinary capability Microsample capability	yes ves	no ves	
Prepares microscopic slides automatically or flags problems for slide prep If automatic slidemaker available, No. installed/list price	yes (flags only) —/\$125,000	yes —	
Archives patient data for later comparison	yes	yes	
Patient-specific archiving Maximum archived data accessible when system online	yes 10,000 results	yes 40,000 stand-alone; 120,000 in workcell	
Memory capacity—numeric results–No. specimens Memory capacity—histo/cytograms–No. specimens	10,000 results 10,000 results	40,000 stand-alone; 120,000 in workcell 40,000	
 Stored in conjunction with CBC data Histo/cytogram images and CBC data printed as one report 	yes yes	yes yes	
Saved results can be recalled and retransmitted Saved data can be sorted for reprocessing or report transmission	yes yes	yes yes	
Performs delta checks Tags and holds results for followup, confirmatory testing, or rerun	no yes	yes yes	
Parameters for flags for holding samples are defined by Some results can be transmitted to LIS while others held	user or vendor yes	yes some results	
Scattergram display: cell-specific color Histogram display: color with threshold	yes yes	yes yes	
Choice of desired specimen and/or result information displayed	yes	yes	
LIS interface formats supported Information transferred on LIS interface	proprietary numeric and flag results, histograms and scatterplots, instrument to LIS; patient demographics, orders, LIS to instrument—broadcast	ASTM 1394 and 1381 numeric and flag results, histograms and scatterplots, instrument to LIS; patient demographics, patient orders, LIS to instrument—broadcast; host query for natient demographics and orders (available with release of workcell)	
LOINC codes transmitted with results How Jabs get LOINC codes for reagent kits	no 	yes phone or Web support	
Optional data management or collation system • Software features	yes enhanced OC, data archiving, data collation from multiple instruments	yes, BCI enhanced OC. data archiving, data collation from multiple instruments user-	
Software found to	כההמוסטים עס, שמע מרסווזיווש, שמנם טטומנוטו וזטוו וועונעורב וואנו עווופוונא	definable decision rules, ISLH rules, delta check included with DxH; Remisol Advance also available	
Interface available or planned to automate specimen-handling system Bar-code symbologies read on tube Accommodates bar-code placement per CLSI standard Auto2A	 Codabar, codes 39 and 128, interleaved 2 of 5 yes	Beckman Coulter Codabar, codes 39 and 128, interleaved 2 of 5, NW7 yes	
Time required for maintenance by lab personnel	daily: 30 seconds; bi-weekly: 5 minutes; monthly: 10 minutes	daily: 2 minutes; weekly: as needed; monthly: as needed	
Onboard maintenance records Time from communication of problem to engineer on site	yes —	yes varies	
Onboard diagnostics/limited to software problems Manufacturer can perform diagnostics via modem	yes/no —	yes/no yes	
Acquisition program based on cost-per-reportable result	no	yes	
Distinguishing features (supplied by company)	MAPSS cell-by-cell analysis; reticulocyte with reportable IRF (immature reticulocyte fraction) up to 50 different reticulor to see the configuration of the second	integrated automation w/auto repeat/reflex testing based on extended onboard	
	analysis	comparisons; flow cytometric digital morphology w/five angles of light scatter;	
	*please see the CELL-DYN 3700 operator's manual for product labeling, including warnings, limitations, and precautions	processing, DataFusion; future scalability options include DxH workcells with trackless connectability include the scalability options include the profigurable with the termination of the scalability include the scalability includes the scalabili	
Note: a dash in lieu of an answer means company did not answer question or question is not applicable	~veterinary applications for medical devices are not currently subject to premarket regulation by FDA	four analyzers; integrated slidemaker/slidestainer; consolidated database	

Part 4 of 14	Beckman Coulter Jim Cureton jdcureton@beckman.com 250 So. Kraemer Blvd Brea, CA 92821 714-661-4942	Beckman Coulter Jim Cureton jdcureton@beckman.com 250 So. Kraemer Blvd Brea, CA 92821 714-961-4042 www.beckmancoulter.com
	THE SOT ESTE WWW.SCONTRAILCOURD.COM	
Name of instrument First year installed in U.S./outside U.S./No. of units sold in 2009 No. units installed in U.S./outside U.S./List price	LH 1500 Hematology Automation Series 2002/2003/15 >65/25/varies	LH 780/LH 785 2006/2007/160 >460/>475/LH 780: \$214,500; LH 785: \$389,500
Test menu: • Chartable (standard menu: WBC, RBC, Hb, Hct, MCV, MCH, MCHC, PLT, %&# neut, mono, lymph, eos, baso):	standard menu (left) plus: RDW, MPV, retic %&#, IRF, graded RBC morph., NRBC %&#, TNC & RBC on CSF, synovial, and serous fluids</td><td>standard menu (left) plus: RDW, RDW-SD, MPV, retic %&#, IRF, MPV, graded RBC morph., NRBC %&#, TNC & RBC on CSF, synovial, and serous fluids</td></tr><tr><td>• Laboratory • Flags</td><td></td><td>— user-definable age-, gender-, and/or location-based reference intervals; action and critical limits, user-definable RBC morphology; user-definable sensitivity for differential abnormal nonulations, support and definitive messages</td></tr><tr><td>FDA-cleared tests but not clinically released</td><td>—</td><td>—</td></tr><tr><td>Tests not available but submitted for clearance Tests in development</td><td>_</td><td></td></tr><tr><td>For research use only</td><td>MSCV, HLR %&#, PDW, PCT, WBC research population data (RPD) LH 780: MAF, RSF, RDWR-SD, RDWR-CV</td><td>RSF, MAF, MSCV, HLR %&#, RDWR-CV, RDWR-SD, PDW, PCT, WBC research population data (RPD)</td></tr><tr><td>Tests unique to analyzer</td><td>IVD: NRBC, body fluids; RUO: MSCV, WBC RPD</td><td>IVD: NRBC, body fluids, RDW-SD; RUO: MSCV, RSF, MAF, WBC RPD</td></tr><tr><td>Differential method(s) used</td><td>Coulter's 3-D VCS biophysical flow cytometry with IntelliKinetics, AccuGate, and AccuFlex technologies</td><td>Coulter's 3-D VCS biophysical flow cytometry with Intellikinetics, AccuGate, and AccuFlex technologies</td></tr><tr><td>Linearity: • WBC count (10⁹/L)/RBC count (10¹²/L) • Hemoglobin (g/dL)/platelet (10⁹/L) • MCV (fL) or Hct (%) Precision: • WBC count/RBC count • Hemoglobin/platelet • MCV or Hct Accuracy of automated differential compared with manual differential (per CLSI H-20A), regression equation Interfering substances: • WBC</td><td>0-400/0-8.0 0-25/0-3,000 50-200 (MCV) <1.7 percent/<0.8 percent <0.8 percent/<3.3 percent <0.8 percent (MCV) lymph% = ±3.0%,; neut% = ±3.0%,; mono% = ±2.0%,; eos% = ±1.0%,; baso% = ±1.0%, unusual RBC abnormalities that resist lysing, NRBC, fragmented WBC, unlysed particle >35 fL, giant PLT, PLT clumps</td><td>0-400/0-8.0 0-25/0-3,000 50-200 (MCV) <1.7 percent/<0.8 percent <0.8 percent/<3.3 percent <0.8 percent (MCV) lymph% = ±3.0%,; neut% = ±3.0%,; mono% = ±2.0%,; eos% = ±1.0%,; baso% = ±1.0%, unusual RBC abnormalities that resist lysing, NRBC, fragmented WBC, unlysed particle >35 fL, giant PLT, PLT clumps</td></tr><tr><td>RBC MCV or Hct Platelet Hemoglobin Interfering substances: differential</td><td>very high WBC, high concentration large PLT, autoagglutinins very high WBC, high concentration large PLT, autoagglutinins very small RBCs and WBC fragments may interfere very high WBC, severe lipemia, heparin, rare lyse-resistant RBCs high triglycerides may affect lysing</td><td>very high WBC, high concentration large PLT, autoagglutinins very high WBC, high concentration large PLT, autoagglutinins (MCV) very small RBCs and WBC fragments very high WBC, severe lipemia, heparin, rare lyse-resistant RBCs high triglycerides may affect lysing</td></tr><tr><td>Age- and sex-specific reference ranges Maximum CBCs per hour/Maximum CBCs and differentials per hour Recommended average frequency of calibration • Modes calibrated/parameters calibrated Frequency of blood/latex controls Minimum specimen volume open/closed/Sample dead volume closed Tube sampling supported Veterinary capability Microsample capability Prepares microscopic slides automatically or flags problems for slide prep</td><td>yes 105 per analyzer on automation system/105 per analyzer on automation system as dictated by your lab procedures, local or national regulations primary/RBC, WBC, Hb, MCV, PLT, MPV per CLIA, CAP, JCAHO, state or lab SOP/once per day 200 μL/300 μL, 550 μL with slidemaker/1.0 mL yes no yes yes</td><td>yes 105/105 as dictated by your lab procedures, local or national regulations primary/RBC, WBC, Hgb, MCV, PLT, MPV per CLIA, CAP, JCAHO, state or lab SOP/once per day 200 μL/300 μL (550 μL with slidemaker)/1.0 mL yes no yes yes</td></tr><tr><td>If automatic slidemaker available, No. installed/list price</td><td>>850 (U.S.)/\$110,000</td><td>>50/\$110,000</td></tr><tr><td>Archives patient data for later comparison Patient-specific archiving Maximum archived data accessible when system online Memory capacity—numeric results–No. specimens Memory capacity—histo/cytograms–No. specimens • Stored in conjunction with CBC data • Histo/cytogram images and CBC data printed as one report Saved results can be recalled and retransmitted Saved data can be sorted for reprocessing or report transmission Performs delta checks Tags and holds results for followup, confirmatory testing, or rerun Parameters for flags for holding samples are defined by Some results can be transmitted to LIS while others held Scattergram display: color with threshold Choice of desired specimen and/or result information displayed</td><td>yes yes 20,000 samples per instrument 20,000 samples per instrument yes yes yes yes yes yes user or vendor yes yes yes yes yes</td><td>yes yes 20,000 samples 20,000 samples 20,000 samples yes yes yes yes yes user or vendor yes yes yes yes yes yes</td></tr><tr><td>LIS interface formats supported Information transferred on LIS interface</td><td>RS-232 numeric and flag results, histograms and scatterplots, instrument to LIS; patient demographics, patient orders, LIS to instrument—broadcast</td><td>proprietary numeric and flag results, histograms and scatterplots, instrument to LIS; patient demographics, patient orders, LIS to instrument—broadcast</td></tr><tr><td>LOINC codes transmitted with results How labs get LOINC codes for reagent kits Optional data management or collation system • Software features</td><td>no contact technical support yes, DL2000, Command Central enhanced QC, data archiving, data collection from multiple instruments, extensive decision rules, delta checking, patient results and graphics</td><td>no contact technical support yes, DL2000, Command Central enhanced QC, data archiving, data collection from multiple instruments, extensive decision rules, delta checking, patient results and graphics, centralized result management</td></tr><tr><td>Interface available or planned to automate specimen-handling system Bar-code symbologies read on tube Accommodates bar-code placement per CLSI standard Auto2A</td><td>Beckman Coulter Codabar, codes 39 and 128, interleaved 2 of 5, NW7 yes</td><td>Beckman Coulter Codabar, codes 39 and 128, interleaved 2 of 5 yes</td></tr><tr><td>Time required for maintenance by lab personnel</td><td>daily: automation system = 5 minutes; weekly: automation = 10 minutes;</td><td>monthly: 2 minutes</td></tr><tr><td>Onboard maintenance records</td><td>yes</td><td>yes</td></tr><tr><td>Time from communication of problem to engineer on site Onboard diagnostics/limited to software problems Manufacturer can perform diagnostics via modem</td><td>yes/no yes</td><td> yes/no yes</td></tr><tr><td>Acquisition program based on cost-per-reportable result</td><td>yes</td><td>yes</td></tr><tr><td>Distinguishing features (supplied by company)</td><td>system automatically loads and unloads cassettes, performs reflex and repeat testing, sorts tubes for off-line tests, stores tubes with availability for retrieval for any test type; multiple configurations available; RUO: WBC research population data</td><td>extensive onboard user-defined decision support; extended linearity for WBC and PLT using AccuCount technology; enumeration of NRBCs with every differential; random access/automation ready; integrated slidemaker/ slidestainer options; proservice; electronic IQAP; expanded QC module; RUO: WBC research population data</td></tr></tbody></table>	

Homatology analyzors

Part 5 of 14	Beckman Coulter Jim Cureton jdcureton@beckman.com 250 So. Kraemer Blvd Brea, CA 92821 714-961-4942 www.beckmancoulter.com	Beckman Coulter Jim Cureton jdcureton@beckman.com 250 So. Kraemer Blvd Brea, CA 92821 714-961-4942 www.beckmancoulter.com
Name of instrument First year installed in U.S./outside U.S./No. of units sold in 2009 No. units installed in U.S./outside U.S./List price	Coulter LH 750 2001/2001/250 (U.S.) >2,400/>2,300/\$195,000	Coulter LH 500 2003/2003/200 (U.S. only) >1,300/>1,700/\$145,000
Test menu: • Chartable (standard menu: WBC, RBC, Hb, Hct, MCV, MCH, MCHC, PLT, %&# neut, mono, lymph, eos, baso): • Laboratory	standard menu (left) plus: RDW, MPV, retic #&%, IRF, MPV, graded RBC morph., NRBC %&#, TNC & RBC on CSF, synovial, and serous fluids —</td><td>standard menu (left) plus: retic #, retic %, MRV, IRF, RDW, MPV</td></tr><tr><td>• Flags</td><td>user-definable age-, gender-, and/or location-based reference intervals; action and critical limits; user-definable RBC morphology; gradient messages (=+, ++, +++); user-selectable sensitivity for differential abnormal population suspect messages</td><td>user-definable age-, gender- and/or location-based reference intervals, action and critical limits; user-definable RBC morphology; gradient messages</td></tr><tr><td>FDA-cleared tests but not clinically released Tests not available but submitted for clearance Tests in development</td><td>MCCV UI R 42.4 DDW PCT WRC research nonulation data (RPD)</td><td></td></tr><tr><td>Tests unique to analyzer</td><td>IVD: NRBC. bodv fluids; RUO: MSCV, WBC RPD</td><td>—</td></tr><tr><td>Differential method(s) used</td><td>Coulter's 3-D VCS biophysical flow cytometry with IntelliKinetics, AccuGate,</td><td>Coulter's 3-D biophysical flow cytometry with AccuGate 500, Reaction Manager</td></tr><tr><td>Linearity: • WBC count (10⁹/L)/RBC count (10¹²/L)</td><td>and AccuFlex technologies 0–400/0–8,0</td><td>technologies 0–200/0–8,0</td></tr><tr><td>Hemoglobin (g/dL)/platelet (10⁹/L) MCV (fL) or Hct (%)</td><td>0–25/0–3,000 50–200 (MCV)</td><td>0–25/0–2,000 50–150 (MCV)</td></tr><tr><td>Precision: • WBC count/RBC count • Hemoglobin/platelet</td><td><1.7 percent/<0.8 percent <0.8 percent/<3.3 percent</td><td>2.5 percent/<2.0% percent 1.5 percent/<5.0 percent</td></tr><tr><td>MCV or Hct Accuracy of automated differential compared with manual</td><td><0.8 percent (MCV) lymph% = ±3.0%,; neut% = ±3.0%,; mono% = ±2.0%,;</td><td>2 percent (MCV) lymph= ± 1.5 % mean diff., —; mono= ± 1.5 % mean diff., —; neut= ± 2.0%</td></tr><tr><td>differential (per CLSI H-20A), regression equation Interfering substances: • WBC</td><td>$eos\% = \pm 1.0\%, -; baso\% = \pm 1.0\%, -;$ unusual RBC abnormalities that resist lysing, NRBC, fragmented WBC, unlysed</td><td>mean diff., —; eos= ± 0.5 % mean diff., —; baso= ± 0.5 % mean differential, — lyse-resistant, nucleated RBCs, frag. WBCs, agglutination WBCs, unlysed</td></tr><tr><td>• RBC</td><td>particle >35 fL, giant PLT, PLT clumps very high WBC, high concentration large PLT, autoagglutinins</td><td>particles >35 fL, very large or agg. PLTs, fibrin, cell frag., or other debris very high WBC count, many very large PLTs, agglutinin RBCs, RBCs <36 fL,</td></tr><tr><td>• MCV or Hct</td><td>MCV and Hct: very high WBC, high concentration large PLT, autoagglutinins</td><td>fibrin, cell fragments, or other debris MCV: very high WBC count, high concentration of very large PLTs, agglutinin</td></tr><tr><td>Platelet</td><td>very small RBCs and WBC fragments may interfere</td><td>RBCs, RBC fragments <36 fL, rigid RBCs very small red cells near the upper threshold, cell fragments, clumped PLTs,</td></tr><tr><td>• Kemalahin</td><td>histo WDC source linomia, henerin, rare luse-resistant RRCs</td><td>PLT fragments or cellular debris near the lower FLT uncention, grant FLS, FL clumps, red and white cell fragments, electronic noise, very small red cells</td></tr><tr><td>• nonogiouni</td><td>very nign web, severe inpenied, neparin, rate ryse-resistant russs</td><td>very high WBC count, severe inpenna, nepatin, ryser constant rises, analysis such as elevated triglycerides factors that affect WBC count above or high triglycerides that affect lysing,</td></tr><tr><td>literienny substances anterstaat</td><td>liigii uigiyoonuos may anooc iysmy</td><td>hypogran. granulocytes, agranul. granulocytes, lyse-resist. red cells, very small or multi-population lymphocytes, elevat. trigly., precipitated elev. proteins</td></tr><tr><td>Age- and sex-specific reference ranges Maximum CBCs per hour/Maximum CBCs and differentials per hour</td><td>yes 105/105</td><td>yes 75/75</td></tr><tr><td>Recommended average frequency of calibrated</td><td>as dictated by your lab procedures, local or national regulations</td><td>as dictated by your lab procedures, local or nauonal regulations</td></tr><tr><td>Modes callorated/parameters callorated Frequency of blood/latex controls Minimum specimen volume open/closed/Sample dead volume closed Tube sampling supported</td><td>primary/HBC, WBC, HD, MCV, FLI, MFV per CLIA, CAP, JCAHO, state or lab SOP/once per day 200 μL/300 μL, 550 μL with slidemaker/1.0 mL ves (multiple sizes and styles)</td><td>primary/RbG, WBG, RD, MGV, FER, MFV not specified/once per day 125 μL/185 μL/tube dependent ves (10.25 × 75 mm or less; 13 × 75 mm or less)</td></tr><tr><td>Veterinary capability Microsample capability</td><td>no yes</td><td>no yes</td></tr><tr><td>Prepares microscopic slides automatically or flags problems for slide prep</td><td>yes, both</td><td>no</td></tr><tr><td>If automatic slidemaker available, No. Installeu/list price</td><td>>900 (U.S.)/\$110,000</td><td></td></tr><tr><td>Archives patient data for fater companison Patient-specific archiving</td><td>yes yes</td><td>yes yes</td></tr><tr><td>Memory capacity—histo/cutourams—No. specimens</td><td>20,000 samples 20,000 camples</td><td>20,000 samples</td></tr><tr><td>Stored in conjunction with CBC data Histo/cytogram images and CBC data printed as one report</td><td>yes</td><td>yes</td></tr><tr><td>Saved results can be recalled and retransmitted Saved data can be sorted for reprocessing or report transmission</td><td>yes ves</td><td>yes ves</td></tr><tr><td>Performs delta checks Tags and holds results for followup, confirmatory testing, or rerun</td><td>yes ves</td><td>yes ves</td></tr><tr><td>Parameters for flags for holding samples are defined by Some results can be transmitted to LIS while others held</td><td>user or vendor yes</td><td>user yes</td></tr><tr><td>Scattergram display: cell-specific color Histogram display: color with threshold</td><td>yes yes</td><td>yes yes</td></tr><tr><td>Choice of desired specimen and/or result information displayed</td><td>yes DC 000 proprietory</td><td>yes DC 000 proprietory</td></tr><tr><td>LIS Interrace formats supported Information transferred on LIS interface</td><td>RS-232, proprietary numeric and flag results, histograms and scatterplots, instrument to LIS; patient demographics, orders, LIS to instrument—broadcast</td><td>RS-232, proprietary numeric and flag results, histograms and scatterplots, instrument to LIS; patient demographics, orders, LIS to instrument—broadcast</td></tr><tr><td>LOINC codes transmitted with results How labs get LOINC codes for reagent kits</td><td>no technical support</td><td>no technical support</td></tr><tr><td>Optional data management or collation system • Software features</td><td>yes, DL2000, Command Central enhanced QC, data archiving, common database, extensive decision rules, delta checking, patient results and graphics, centralized management of all</td><td>yes, DL2000, Command Central enhanced QC, data archiving, data collation from multiple instruments, common database, extensive decision rules, delta checking, patient results</td></tr><tr><td>Interface available or planned to automate specimen-handling system Bar-code symbologies read on tube Accommodates bar-code placement per CLSI standard Auto2A</td><td>Beckman Coulter Codabar, codes 39 and 128, interleaved 2 of 5, NW7 ves</td><td>Codabar, codes 39 and 128, ASTM, interleaved 2 of 5, NW7 ves</td></tr><tr><td>Time required for maintenance by lab personnel</td><td>monthly: 2 minutes</td><td>none</td></tr><tr><td>Onboard maintenance records</td><td>yes</td><td>yes</td></tr><tr><td>Time from communication of problem to engineer on site Onboard diagnostics/limited to software problems Manufacturer can perform diagnostics via modem</td><td>yes/no</td><td>yes/no</td></tr><tr><td>Acquisition program based on cost-ner-reportable result</td><td>yes</td><td>yes .</td></tr><tr><td>Distinguishing features (supplied by company)</td><td>extensive decision support; enumeration of NRBCs with every differential; random access; automation ready; extended linearity for WBC and PLTs; RUO:</td><td>extensive decision support, extended linearity for WBC and PLT, low review rate, small footprint, superior reliability, ProService, electronic IQAP</td></tr><tr><td>Note: a dash in lieu of an answer means company did not answer question or question is not applicable</td><td>WBC RPD</td><td></td></tr></tbody></table>	

Part 6 of 14	Beckman Coulter	Beckman Coulter
	Jim Cureton jdcureton@beckman.com	Kelly Colwell KMColwell@beckman.com
	250 So. Kraemer Biva Brea, CA 92821	250 Sõ. Kräemer Biva Brea, CA 92821
	714-961-4942 www.beckmancoulter.com	714-961-4110 www.beckmancoulter.com
Name of instrument	Coulter HmX	Coulter Ac+T 5diff Family; Ac+T 5diff AL
First year installed in U.S./outside U.S./No. of units sold in 2009	1999 HmX AL	2001/2000; 2003/2003; cap pierce: not applicable, autoloader: not applicable
No. units installed in 0.5./outside 0.5./List price	>1,140/>2,200/\$133,000	300/750/\$54,500 autoloader model
Test menus - Obertable (charden menus WDO DDO UK Ust MOV	standard many (16th) plus: DDW MDV actic #20/ availed DD0 mamb	standard many (laft) alus, DDW MDV
Iest menu: • Gnartable (standard menu: WBC, KBC, Hb, Hct, MCV, MCH, MCHC, PLT, %&# neut, mono, lymph, eos, baso):	standard menu (iett) plus: KDW, MPV, retic #&%, graded KBC morph., iKF, MKV	standard menu (iert) plus: KDW, MPV
• Laboratory	-	atyp. lymph. # (ATL#), atyp. lymph % (ATL%), immature cells # (IMM#),
• Flags	comprehensive high/low, definitive and suspect messages	complete operator selectable flagging
FDA-cleared tests but not clinically released	_	_
Tests not available but submitted for clearance	-	-
For research use only	— PCT, PDW	— PCT, PDW, IMM, ATL
Tests unique to engly ar		
	-	
Differential method(s) used	Coulter's 3-D VCS technology	AcV technology combining cytochemistry, focused flow impedance, and
Linearity: • WBC count (10 ⁹ /L)/RBC count (10 ¹² /L)	0-99.9/0-7.0	0.4–91.3/0.3–8.0*; AL: 0.4–120.0/0.3–8.0
Hemoglobin (g/dL)/platelet (10 ⁹ /L) MOV (fL) on that (f())	0-25/0-999	0-22/10-1,000*; AL: 1.3-24.0/10.0-1,000
• WCV (IL) of HCt (%) Precision: • WBC count/RBC count	<pre>>0-100 (MCV) <2.5 percent/<2.0 percent</pre>	<pre>1.8-03.8 (nct)^ <2 percent/<2 percent</pre>
Hemoglobin/platelet	<1.5 percent/<5.0 percent	<1 percent/<5 percent
MCV or HCt Accuracy of automated differential compared with manual	<2.0 percent (MGV) lymph%= ±3.0%, —; mono%= ±2.0%, —; neut%= ±3.0%, —;	<1.0 percent (HCt); AL: <2.0% (HCt) not available in NCCLS H-20A format
differential (per CLSI H-20A), regression equation	eos%= ±1.0%, -; baso%= ±1.0%,	
Interfering substances: • WBC	unusual RBC abnormalities that resist lysing, NRBC, fragmented WBC, unlysed	NRBCs, PLT clumps, large PLTs, lyse-resistant RBCs
- DPC	particle >35 fL, large PLT	cold applutining DIT clumps WDC quaringerity
• NDU	very myn web, myn concentration of very large PLI, autoaggiutinins	CON AUGUNINIS, FLI CIUNIES, WED OVERINEARILY
MCV or Hct	MCV and Hct: very high WBC, high concentration of large PLT, autoagglutinins	Hct: lipemic samples, high WBC, cold agglutinins
Platelet	very small RBCs and WBC fragments may cause no fit	RBC and WBC fragments
e Hemerlehin	voru high WPC, aquara linamia, hanarin, rara luga rasistant DPCa	alayatad WPC linamia
Interfering substances: differential	high triglycerides may affect lysing	lyse-resistant RBCs, NRBCs, lipemia
Age- and sex-specific reference ranges	gender-specific printout	yes
Maximum CBCs per hour/Maximum CBCs and differentials per hour	75/75	60/60; 80/80
Modes calibrated/parameters calibrated	as dictated by your lab procedures, local, or national regulations primary/RBC, WBC, Hb, MCV, PLT, MPV	open or closed/RBC, WBC, Hb, Hct, PLT
Frequency of blood/latex controls	not specified/once per day	not specified/none
Minimum specimen volume open/closed/Sample dead volume closed	125 µL/185 µL/50 µL predilute/0.5 mL	30 µL for CBC/30 µL/varies by tube size; 53 µL for CBC differential/53 µL for CBC differential/varies by tube size
Tube sampling supported	yes (multiple sizes and styles)	yes (multiple sizes)
Veterinary capability Microsample capability	no Ves	no ves
Prepares microscopic slides automatically or flags problems for slide prep	no	no
If automatic slidemaker available, No. installed/list price	_	_
Avabines nations data for later comparison		
Patient-specific archiving	yes yes	no
Maximum archived data accessible when system online	5,000 samples	10,000 samples
Memory capacity—numeric results–No. specimens Memory capacity—histo/cytograms–No. specimens	5,000 samples 5,000 samples	10,000 samples 10,000 samples
Stored in conjunction with CBC data	yes	yes
Histo/cytogram images and CBC data printed as one report Saved results can be recalled and retransmitted	yes ves	yes ves
Saved data can be sorted for reprocessing or report transmission	yes	yes
Tags and holds results for followup, confirmatory testing, or rerun	no Ves	no Ves
Parameters for flags for holding samples are defined by	user or vendor	user or vendor
Some results can be transmitted to LIS while others held Scattergram display: cell-specific color	yes, through a selective batch process four colors/cell types	yes, through user-defined criteria no
Histogram display: color with threshold	colors without thresholds	yes
Choice of desired specimen and/or result information displayed	10	yes
LIS interface formats supported	RS-232, proprietary	proprietary; proprietary ASTM
Information transferred on LIS interface	numeric and flag results, histograms and scatterplots, instrument to LIS; patient demographics, orders. LIS to instrument—broadcast	numeric and flag results, histograms and differential plots, instrument to LIS; patient demographics, orders. LIS to instrument—broadcast
LOINC codes transmitted with results	no	no
nuw labs get LUING codes for reagent Kits Optional data management or collation system	technical support yes, DL2000	technical support yes, DL2000, Command Central
Software features	enhanced QC, data archiving, common database, delta checking, patient results,	enhanced QC, data archiving, common database, optional data management
	and graphics	extensive decision rules, delta checking, patient results, and graphics available, centralized management of all instruments
Interface available or planned to automate specimen-handling system		
Accommodates bar-code placement per CLSI standard Auto2A	oouavai, coues 59 anu 128, interieaved 2 of 5, NW7 No	oodabar, coues 59 and 128, interieaved 2 of 5, EAN 8 and 13 yes
lime required for maintenance by lab personnel	none	none
Onboard maintenance records	no	yes
Onboard diagnostics/limited to software problems	 yes/no	 yes/no
Manufacturer can perform diagnostics via modem	no	no
Acquisition program based on cost-per-reportable result	yes	yes
	VCC toohoology low review sole on watting daily maintained to the	quantitative five part WDC differential emirates and 20 of a family of
Distinguishing reatures (supplied by company)	counting; aperture burn circuit; sweepflow; SmartStart system; autoloader and	quantitative nive-part was dimerential; aspirates only 30 µL of sample; requires small space footprint and runs quietly; AL has auto repeat based on decision
	single-sample models	rules

Part 7 of 14	HORIBA Medical	HORIBA Medical
	Jim Knowles jimknowles@horiba.com 34 Bunsen	Jim Knowles jimknowles@horiba.com 34 Bunsen
	Irvine, CA 92618	Irvine, CA 92618
	888-903-5001 ext. 4553 www.noriba.com/us/en/medical	888-903-5001 ext. 4553 www.horiba.com/us/en/medical
Name of instrument	Pentra 60C+ Hematology Analyzer	Pentra XL 80
No. units installed in U.S./outside U.S./No. of units sold in 2009	>350/>600/\$45,476	2004/2003/31 >200/>900/\$73,826
Test menu: • Chartable (standard menu: WBC, RBC, Hb, Hct, MCV,	standard menu (left) plus: RDW, MPV	standard menu (left) plus: automatic dilution of overrange results
MCH, MCHC, PLT, %&# neut, mono, lymph, eos, baso):	atun lumuh atun lumuh % 11C 11C %	(WBC × 3, RBC/hgb/PLT × 2), RDW, MPV
-		
• Flags	operator selectable flagging	operator selectable flagging
FDA-cleared tests but not clinically released	-	-
Tests in development	_	_
For research use only	PCT, PDW, ATL, LIC	PCT, PDW, ATL, LIC
Tests unique to analyzer	_	automatic dilution protocol
	DHSS technology combining cytochemistry, focused flow impedance, and light	DHSS technology combining cytochemistry, focused flow impedance, and light
	absorbance principles of measurement	absorbance
Linearity: • WBC count (10 [°] /L)/RBC count (10 ¹ /L) • Hemoglobin (g/dL)/platelet (10 ⁹ /L)	0–120/0–8 0–24/0–1.900	0–120/0–8 0–24/0–1.900 (>2 α/dL Hb)
• MCV (fL) or Hct (%)	0–67 (Hct)	0–67 (Hct)/0–2,800 (<2 g/dL Hb)
Precision: • WBC count/RBC count • Hemoglobin/platelet	<2 percent/<2 percent <1 percent/<5 percent	<2 percent/<2 percent <1 percent/<5 percent
MCV or Hct	<2 percent (Hct)	<2 percent (Hct)
Accuracy of automated differential compared with manual differential (per CLSI H-20A), regression equation	neut% r=0.99,; lympn% r=0.98,; mono% r=0.96,; eos% r=0.89,; baso% r=0.54,	neut% r=0.99, —; lympn% r=0.98, —; mono% r=0.96, —; eos% r=0.89, —; baso% r=0.54, —
Interfering substances: • WBC	NRBCs, PLT clumps, lyse-resistant RBCs	NRBCs, PLT clumps, lyse-resistant RBCs
• RBC	cold agglutinins	cold agglutinins
• MCV or Hct	Hct: extreme leukocytosis	Hct: extreme leukocytosis
Platelet	microcytes, PLT clumps	microcytes, PLT clumps
• Hemoglobin	extreme lipemia/leukocytosis	extreme lipemia, leukocytosis
Interfering substances: differential	NRBC, lyse-resistant RBCs, extreme hyperbilirubinemia	NRBCs, lyse-resistant RBCs, extreme hyperbilirubinemia
Age- and sex-specific reference ranges	yes	yes
Maximum CBCs per hour/Maximum CBCs and differentials per hour Recommended average frequency of calibration	60/60 six months	80/80 six months
 Modes calibrated/parameters calibrated 	closed-open/WBC, RBC, Hb, Hct, PLT, MPV	open, closed/WBC, RBC, Hb, Hct, PLT, MPV
Frequency of blood/latex controls Minimum specimen volume open/closed/Sample dead volume closed	per CLIA standards/none 20 ul for CBC and 53 ul for CBC and differential/20 ul for CBC 8, 53 ul for CBC	per CLIA standards/none 30 ul for CBC/53 ul for CBC and differential/0.5 ml
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Tube sampling supported	and differential/— yes (multiple sizes)	yes (autoloader 13 $ imes$ 75 mm; closed tube 16 sizes and micro)
Tube sampling supported Veterinary capability Microsample capability	and differential/— yes (multiple sizes) yes	yes (autoloader 13 \times 75 mm; closed tube 16 sizes and micro) yes
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December 2010

Hematology analyzers

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Part 8 of 14	HORIBA Medical Jim Knowles jimknowles@horiba.com 34 Bunsen Irvine, CA 92618	Siemens Healthcare Diagnostics Rita White rita.f.white@siemens.com 500 GBC Drive Newark, DE 19702
	888-903-5001 ext. 4553 www.horiba.com/us/en/medical	888-899-2896 www.usa.siemens.com/diagnostics
Name of instrument First year installed in U.S./outside U.S./No. of units sold in 2009 No. units installed in U.S./outside U.S./List price	Pentra DX120 2005/2004/6 >20/>400/\$199,500	Advia 120 Hematology System 1998/1998/— >750/3,500/\$169,000-\$189,000
Test menu: • Chartable (standard menu: WBC, RBC, Hb, Hct, MCV, MCH, MCHC, PLT, %&# neut, mono, lymph, eos, baso): • Laboratory	standard menu (left) plus: NRBCs, reticulocytes, IRF, MRV LIC%&#, atyp lymphs %&#, IMG %&#, IML %&#, IMM %&#, RETL%, RETM%, RETH%, IMR%, MRU, MFI%, CRC%</td><td>standard menu (left) plus: CHCM, MPV, RDW, HDW, LUC %&#, retic %&#, CHr, CHCMr, MCVr; CSF: WBC, RBC, PMN, MN, neut, lymph, mono; cellular Hgb %: hypo, hyper, macro, micro; calc. Hb, MPXI; %: blasts, PMN, MN; large PLT count; RBC fragment count; RBC ghost count; CSF: WBC, RBC, three-part differential; body fluids: TNC, RBC</td></tr><tr><td>• Flags</td><td>-</td><td>left shift, atyp. lymph, blasts, immature grans, myeloperoxidase deficiency, aniso, micro, macro, Hb variation, hypo, hyper, NRBC, RBC fragments, RBC ghost, large PLT, PLT clumps</td></tr><tr><td>FDA-cleared tests but not clinically released Tests not available but submitted for clearance</td><td>-</td><td>-</td></tr><tr><td>Tests in development</td><td></td><td>IRF, MPC, MPM</td></tr><tr><td></td><td>FGI, FDW, AIL, LIG, IWG, INE, INNN</td><td>CUCM UNW CU, CUCM, MDC MDM, CSE, WRC DRC MN PMN neut lymnh</td></tr><tr><td>lêsts unique to analyzer</td><td>_</td><td>כאכואן, אטש, כאר, כארטאון, אוייט, אוייט, נאסי, עסט אסט, אוא, ראא, אפענ, ואואטא, Mono</td></tr><tr><td>Differential method(s) used</td><td>cytochemistry (chlorazol black E) and absorbance</td><td>perox-peroxidase cytochemistry staining with light scatter and absorption;</td></tr><tr><td>Linearity: • WBC count (10⁹/L)/RBC count (10¹²/L)</td><td>0-150/0.5-8.1</td><td>0.02–400/0–7.0; CSF WBC 0–5,000/μL; CSF RBC 0–1,500/μL</td></tr><tr><td>Henographic (g/uL)/platelet (107L) MCV (fL) or Hct (%)</td><td>2–25/0–2,000 0–80 (Hct)</td><td>0-22.5 /5-3,500 30-180 (MCV)</td></tr><tr><td>Precision: • WBC count/RBC count • Hemoglobin/platelet</td><td><2 percent/<2 percent <1 percent/<5 percent</td><td>2.7 percent/1.2 percent 0.93 percent/2.93 percent</td></tr><tr><td>MCV or Hct Acouracy of automated differential compared with manual</td><td><2 percent (Hct) nut% r=0.00</td><td>0.78 percent (MCV)</td></tr><tr><td>differential (per CLSI H-20A), regression equation</td><td>hell $r_{1} = 0.33, -;$ ty input $r_{1} = 0.30, -;$ in one $r_{1} = 0.32, -;$ cos $r_{1} = 0.37, -;$ baso $r_{1} = 0.71, -;$</td><td>Nett% 1=0.397, y=1.02x-0.0, ymp1701=0.397, y=1.00x+0.0, mono/21=0.040, y=0.85x-0.3; eos% r=0.979, y=0.87x+0.2; baso% r=0.772, y=0.67x+0.0; luc%</td></tr><tr><td>Interfering substances: • WBC</td><td>NRBCs, PLT clumps, lyse-resistant RBCs</td><td>r=0.994, y=0.92x+0.6 incomplete RBC lysis (perox only)</td></tr><tr><td>RBC NOV or Not</td><td>cold agglutinins</td><td>cold agglutinins, extreme sickle cell</td></tr><tr><td>• MCV or HCT • Platelet</td><td>Hct: extreme leukocytosis microcytes, PLT clumps</td><td>none</td></tr><tr><td>• Hemoglobin</td><td>extreme lipemia, leukocytosis</td><td>high WBC, lip., extremely high bilirubin, interfere with cyanmethemoglobin only, none with direct cellular Hb (CHCM)</td></tr><tr><td>Interfering substances: differential</td><td>NRBCs, lyse-resistant RBCs, extreme hyperbilirubinemia</td><td>incomplete lysis of RBCs, complete myeloperoxidase deficiency</td></tr><tr><td>Age- and sex-specific reference ranges Maximum CBCs per hour/Maximum CBCs and differentials per hour Recommended average frequency of calibration</td><td>yes 120/120 six months</td><td>yes 120/120 six months</td></tr><tr><td> Modes calibrated/parameters calibrated Frequency of blood/latex controls Minimum specimen volume open/closed/Sample dead volume closed </td><td>open, closed/WBC, RBC, Hb, Hct, PLT, MPV per CLIA standards/none 130 µL/200 µL/1 mL</td><td>open, closed, autosampler/all measured parameters once per shift/not required 157 μL/157 μL/<300 μL (tube size dependent)</td></tr><tr><td>Tube sampling supported</td><td>yes</td><td>yes (2, 3, 5, 7 mL—all sizes–open tube)</td></tr><tr><td>Veterinary capability Microsample capability</td><td>yes yes, open mode</td><td>yes</td></tr><tr><td>Prepares microscopic slides automatically or mags problems for slide prep</td><td>yes</td><td>yes</td></tr><tr><td>IT AUTOMATIC SHOEMIAKET AVAILABLE, NO. INSLANEWINSL PINCE</td><td></td><td></td></tr><tr><td>Patient-specific archiving</td><td>yes yes, with MultiLink Data Manager</td><td>yes no</td></tr><tr><td>Maximum archived data accessible when system online Memory capacity—numeric results–No. specimens</td><td>MultiLink Data Manager; 100,000 MultiLink Data Manager unlimited with backup</td><td>10,000 samples 10,000 samples</td></tr><tr><td>Memory capacity—histo/cytograms–No. specimens Stored in conjunction with CBC data </td><td>MultiLink Data Manager unlimited with backup</td><td>10,000 samples</td></tr><tr><td>Histo/cytogram images and CBC data printed as one report</td><td>yes</td><td>yes</td></tr><tr><td>Saved data can be sorted for reprocessing or report transmission</td><td>yes yes</td><td>yes yes</td></tr><tr><td>Performs delta checks Tags and holds results for followup, confirmatory testing, or rerun</td><td>yes ves</td><td>yes ves</td></tr><tr><td>Parameters for flags for holding samples are defined by Some results can be transmitted to LIS while others held</td><td>User</td><td>user or vendor</td></tr><tr><td>Scattergram display: cell-specific color</td><td>yes yes</td><td>yes</td></tr><tr><td>Histogram display: color with threshold Choice of desired specimen and/or result information displayed</td><td>yes yes</td><td>yes yes</td></tr><tr><td>LIS interface formats supported Information transferred on LIS interface</td><td>proprietary, ASTM 1394 and 1238, HL7, IEEE MIB numeric and flag results, histograms and scatterplots, instrument to LIS; patient demographics, orders, LIS to instrument— broadcast</td><td>proprietary (Spec 79) numeric and flag results, histograms and scatterplots, instrument to LIS; patient demographics, orders, LIS to instrument— broadcast; host query for demographics and orders</td></tr><tr><td>LOINC codes transmitted with results</td><td>_</td><td></td></tr><tr><td>How labs get LUINC codes for reagent kits Optional data management or collation system</td><td>yes (MultiLink)</td><td>online documentation yes (CentraLink)</td></tr><tr><td>Software features</td><td>enhanced QC, data archiving, data collation from multiple instruments, auto- validation is used on MultiLink Data Manager; extensive library of validation criteria, delta checking, ability to connect multiple analyzers to one PC</td><td>enhanced QC, data archiving, data collation from multiple instruments, autovalidation, integrated differential pad, remote diagnostics, remote workstations</td></tr><tr><td>Interface available or planned to automate specimen-handling system</td><td>Yes Codebar coder 20 and 128 ASTM interleaved 2 of 5</td><td>LabCell (Siemens)</td></tr><tr><td>Accommodates bar-code placement per CLSI standard Auto2A</td><td>yes</td><td>yes</td></tr><tr><td>Time required for maintenance by lab personnel</td><td>weekly: 15 minutes</td><td>daily: 10 minutes; weekly: 15 minutes; monthly: 15 minutes</td></tr><tr><td>Onboard maintenance records</td><td>yes 24 hours</td><td>yes tarritory dependent</td></tr><tr><td>Onboard diagnostics/limited to software problems</td><td>no/yes</td><td>yes/no</td></tr><tr><td>Manufacturer can perform diagnostics via modem</td><td>yes</td><td>yes</td></tr><tr><td>Acquisition program based on cost-per-reportable result</td><td>yes</td><td>yes</td></tr><tr><td>Distinguishing features (supplied by company)</td><td>high-throughput cell counter with integrated reticulocyte methodology and slidemaker/stainer; fluorescent NRBC counting, auto rerun and reflex testing, autovalidation</td><td>unique laser technology provides cellular Hb for RBCs and retics; 2-D PLT analysis that eliminates interference from RBC fragments and inclusion of large PLTs; dual WBC counts with a linearity of up to 400,000; CSF assay</td></tr></tbody></table>	

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

Hematology analyzers

Part 9 of 14	Siemens Healthcare Diagnostics Rita White rita.f.white@siemens.com 500 GBC Drive Newark, DE 19702 888-899-2896. www.usa siemens.com/diagnostics	Siemens Healthcare Diagnostics Rita White rita.f.white@siemens.com 500 GBC Drive Newark, DE 19702 888-890-2896 www.usa siemens.com/diagnostics
Name of instrument First year installed in U.S./outside U.S./No. of units sold in 2009 No. units installed in U.S./outside U.S./List price	Advia 2120 Hematology System 2004/2004/— >200/>900/\$225,000	Advia 2120i 2008/2008/130 >150/>400/\$225,000
Test menu: • Chartable (standard menu: WBC, RBC, Hb, Hct, MCV, MCH, MCHC, PLT, %&# neut, mono, lymph, eos, baso): • Laboratory • Flags	standard menu (left) plus: CHCM, MPV, RDW, HDW, LUC %&#, retic %&#, CHr, CHCMr, cellular Hgb, MCVr; CSF: WBC, RBC, PMN, MN, neut, lymph, mono % hypo, hyper, macro, micro; MPXI, %: blast, PMN, MN, large PLT count, RBC fragment count; RBC ghost count; NRBC; CSF: WBC, RBC, three-part differential; body fluids: TNC, RBC left shift, atyp. lymph, blasts, immature grans, myeloperoxidase deficiency, aniso, micro, macro, Hb variation, hypo, hyper, NRBC, RBC fragments, RBC</td><td>standard menu (left) plus: CHCM, MPV, RDW, HDW, LUC %&#, retic. %&#, CHr, CHCMr, cellular Hgb, MCVr; CSF: WBC, RBC, PMN, MN, neut, lymph, mono %hypo, hyper, macro, micro, MPXI, %blast, PMN, MN, large PLT count, RBC fragment count, RBC ghost count, NRBC; CSF: WBC, RBC, three-part differential; body fluids: TNC, RBC left shift, atyp. lymph, blasts, immature grans, myeloperoxidase deficiency, aniso, micro, macro, Hgb variation, hypo, hyper, NRBC, RBC fragments, RBC</td></tr><tr><td>FDA-cleared tests but not clinically released Tests not available but submitted for clearance Tests in development For research use only Tests unique to analyzer</td><td>units, raiger Er, r Er clumps — MPC, MPM IRF, CSF, eos CHCM, HDW, CHr, CHCMr, cellular Hgb, MPC, MPM, CSF: WBC, RBC, PMN, MN, neut, lymph, mono</td><td></td></tr><tr><td>Differential method(s) used Linearity: • WBC count (10⁹/L)/RBC count (10¹²/L) • Hemoglobin (g/dL)/platelet (10⁹/L) • MCV (fL) or Hct (%) Precision: • WBC count/RBC count • Hemoglobin/platelet • MCV or Hct Accuracy of automated differential compared with manual differential (per CLSI H-20A), regression equation Interfering substances: • WBC • MCV or Hct • Platelet • MCV or Hct • Interfering substances:</td><td>peroxidase WBC—peroxidase cytochem. staining with light scatter and absorption; baso—cytochem. stripping with 2-angle laser light scatter 0.02-400; CSF WBC 0-5,000/0-7.0; CSF RBC 0-1,500 0-22.5/5-3,500 30-180 (MCV) 2.7 percent/1.2 percent 0.93 percent/2.93 percent 0.78 percent (MCV) neut% r=0.997, y=1.02x-0.6; lymph% r=0.997, y=1.00x+0.8; mono% r=0.943, y=0.85x-0.3; eos% r=0.979, y=0.87x+0.2; baso% r=0.772, y=0.67x+0.0; luc% r=0.994, y=0.92x+0.6 incomplete RBC lysis (peroxidase only) cold agglutinins, extreme sickle cell — extreme lipemia, high WBC, extreme high bilirubin interference w/ colorimetric Hb only, none with cellular Hb incomplete RBC lysis, complete myeloperoxidase deficiency</td><td>peroxidase WBC: peroxidase cytochem. staining w/ light scatter and absorption; baso: cytochem. stripping w/ two-angle laser light scatter 0.02–400 CSF: 0–5,000/0–7.0 CSF: 0–1,500 0-22.5/5–3,500 30–180 (MCV) 2.7 percent/1.2 percent 0.93 percent/2.93 percent 0.78 percent (MCV) neut% r=0.997, y=1.02x-0.6; lymph% r=0.997, y=1.00x+0.8; mono% r=0.943, y=0.85x-0.3; eos% r=0.979, y=0.87x+0.2; baso% r=0.772, y=0.67x+0.0; luc% r=0.994, y=0.92+0.6 incomplete RBC lysis (peroxidase only) cold agglutinins, extreme sickle cell none none extreme lipemia, high WBC, extreme high bilirubin—interference w/ colorimetric Hgb only, none with cellular Hgb incomplete RBC lysis, complete myeloperoxidase deficiency</td></tr><tr><td>Age- and sex-specific reference ranges Maximum CBCs per hour/Maximum CBCs and differentials per hour Recommended average frequency of calibration • Modes calibrated/parameters calibrated Frequency of blood/latex controls Minimum specimen volume open/closed/Sample dead volume closed</td><td>yes 120/120 six months autosampler, closed, open/all measured parameters once per shift/not required 175 μL/175 μL/<300 (tube size dependent)</td><td>yes 120/120 six months auto sampler, closed, open/all measured parameters once per shift/not required 175 μL/175 μL/<300 (tube size dependent)</td></tr><tr><td>Tube sampling supported Veterinary capability Microsample capability Prepares microscopic slides automatically or flags problems for slide prep</td><td>yes (2, 3, 5, 7 mL—all sizes open) yes yes if integrated to Advia Autoslide</td><td>2, 3, 5, 7, mL closed—all tube sizes open yes yes yes</td></tr><tr><td>If automatic slidemaker available, No. installed/list price</td><td>Advia Autoslide, —/\$98,000</td><td>Advia Autoslide, —/\$98,000</td></tr><tr><td>Archives patient data for later comparison Patient-specific archiving Maximum archived data accessible when system online Memory capacity—numeric results-No. specimens Memory capacity—histo/cytograms-No. specimens • Stored in conjunction with CBC data • Histo/cytogram images and CBC data printed as one report Saved results can be recalled and retransmitted Saved data can be sorted for reprocessing or report transmission Performs delta checks Tags and holds results for followup, confirmatory testing, or rerun Parameters for flags for holding samples are defined by Some results can be transmitted to LIS while others held Scattergram display: cell-specific color Histogram display: color with threshold Choice of desired specimen and/or result information displayed</td><td>yes no 10,000 10,000 yes yes yes yes yes yes yes yes yes yes</td><td>yes no 10,000 samples 10,000 samples yes yes yes yes yes yes yes yes yes y</td></tr><tr><td>LIS interface formats supported Information transferred on LIS interface</td><td>proprietary numeric and flag results, histograms and scatterplots, instrument to LIS; patient demographics, patient orders, LIS to instrument— broadcast; host query for patient demographics and orders (when bar code is read, host is queried for orders)</td><td>proprietary (instrument or vendor specific) numeric and flag results, histograms and scatterplots, instrument to LIS; patient demographics, orders, LIS to instrument— broadcast; host query for demographics and orders</td></tr><tr><td>LOINC codes transmitted with results How labs get LOINC codes for reagent kits Optional data management or collation system • Software features Interface available or planned to automate specimen-handling system Bar-code symbologies read on tube Accommodates bar-code placement per CLSI standard Auto2A</td><td>no online documentation yes (CentraLink) enhanced QC, data archiving, data collation from multiple instruments, autovalidation, integrated differential pad, remote diagnostics, remote workstations LabCell (Siemens) Codabar, codes 39 and 128, interleaved 2 of 5 —</td><td>no Web site: online documentation yes, CentraLink enhanced QC, data archiving, data collation from multiple instruments, autovalidation, integrated differential pad, remote diagnostics, remote workstations LabCell (Siemens) Codabar, codes 39 and 128, ASTM, interleaved 2 of 5 yes</td></tr><tr><td>Time required for maintenance by lab personnel Onboard maintenance records Time from communication of problem to engineer on site Onboard diagnostics/limited to software problems Manufacturer can perform diagnostics via modem</td><td>weekly: 15 minutes; monthly: 15 minutes yes territory dependent yes/no yes</td><td>daily: 10 minutes; weekly: 15 minutes; monthly: 15 minutes yes territory dependent yes/no yes</td></tr><tr><td>Acquisition program based on cost-per-reportable result</td><td>yes</td><td>yes</td></tr><tr><td>Distinguishing features (supplied by company)</td><td>unique laser technology provides direct cellular Hb for RBCs and reticulocytes; 2-D PLT analysis that eliminates interference from RBC fragments and inclusion of large PLTs; dual WBC counts with a linearity of up to 400,000; CSF assay</td><td>laser technology provides direct cellular Hgb for RBCs and reticulocytes; 2-D PLT analysis eliminates interference from RBC fragments and inclusion of large PLTs; dual WBC counts with a linearity of up to 400,000; CSF assay</td></tr></tbody></table>	

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

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Part 10 of 14	Sysmex America	Sysmex America
	Tammy Kutz communications@sysmex.com	Tammy Kutz communications@sysmex.com
	1 Nelson C. White Pkwy. Mundelein II, 60060	1 Nelson C. White Pkwy. Mundelein II. 60060
	800-379-7639 www.sysmex.com	800-379-7639 www.sysmex.com
Nome of instrument	Summer VT 4000i	Susmay needl 100;
First year installed in U.S./outside U.S./No. of units sold in 2009	2010/2009/—	2004/2003/103
No. units installed in U.S./outside U.S./List price	32/>150/\$195,700	>800/—/\$18,000
Test menu: • Chartable (standard menu: WBC, BBC, Hb, Hct, MCV	standard menu (left) plus: IG% and # retic % and # IRF RFT-He PIT-0	WRC RRC Hb Hct MCV MCH MCHC PIT %&# neut lymnh MXD
MCH, MCHC, PLT, %&# neut, mono, lymph, eos, baso):</td><td>BF: RBC/WBC/TC/two-part differential</td><td></td></tr><tr><td>Laboratory</td><td>_</td><td>RDW-SD, RDW-CV, MPV</td></tr><tr><td></td><td></td><td></td></tr><tr><td>• Flags</td><td>PLT clumps, PLT ABN distribution, blast, imm grans, left shift, atyp lymph,</td><td>histogram error flags; WBC, RBC, PLT</td></tr><tr><td></td><td>agglutination, turbidity</td><td></td></tr><tr><td>FDA-cleared tests but not clinically released</td><td>_</td><td>-</td></tr><tr><td>Tests not available but submitted for clearance</td><td>-</td><td>-</td></tr><tr><td>For research use only</td><td></td><td>-</td></tr><tr><td>lests unique to analyzer</td><td>reticulocyte hemoglobin, immature reticulocyte fraction, reportable immature granulocyte # and %. PLT-O. BF: RBC/WBC/TC/two-part differential</td><td>-</td></tr><tr><td></td><td></td><td></td></tr><tr><td>Differential method(s) used</td><td>fluorescent flow cytometry</td><td>direct current (DC)</td></tr><tr><td>Linearity: • WBC count (10⁹/L)/RBC count (10¹²/L)</td><td>0-440/0-8</td><td>1.0–99.9/0.3–7.0</td></tr><tr><td> Hemoglobin (g/dL)/platelet (10⁹/L) MCV (fl.) or Het (%) </td><td>0-25/0-5,000 0-60 (Het)</td><td>0.1–25.0/10–999 10–60 Het</td></tr><tr><td>Precision: • WBC count/RBC count</td><td><=3.0 percent/<=1.5 percent</td><td><=3.5 percent/<=2.0 percent</td></tr><tr><td>Hemoglobin/platelet MCV or Het</td><td><=1.5 percent/<=4.0 percent</td><td><=1.5 percent/<=6.0 percent</td></tr><tr><td>Accuracy of automated differential compared with manual</td><td>r=0.95, lymph% r=0.96, mono% r=0.90, eos% r=0.94, baso% r=0.76;</td><td><=2.0 percent Hot NEUT% R=0.98, LYM% R=0.99, MXD % R=0.75,</td></tr><tr><td>differential (per CLSI H-20A), regression equation</td><td>neut % y=0.95x+3.38, lymph % y=0.85x+1.67, mono % y=11.37x+1.89,</td><td>NEUT# R=1.00, LYM# R=1.00, MXD# R=0.90</td></tr><tr><td>Interfering substances: • WBC</td><td>eos% y=0.87x+0.04, DaS0% y=0.48x+0.24 cold agglutinin, PLT aggregation. cryoglobulin. lyse resistant erythrocytes. NRRC.</td><td>lyse-resistant RBC, cold acqlutinins/crvoolobulins. PLT accretation. NRRC</td></tr><tr><td></td><td></td><td></td></tr><tr><td>RBC MCV or Het</td><td>cold agglutinin, severe microcytosis, fragmented RBC, leukocytosis Hot: cold agglutinin, fragmented RBC, spherocytosis, leukocytosis</td><td>cold agglutinins, microcytosis (severe), fragmented RBCs cold agglutinins, fragmented RBCs, leukocytosis (>100.000/ul.)</td></tr><tr><td></td><td>(lymphocytes>100,000/µL)</td><td></td></tr><tr><td>Platelet</td><td>PLT aggregation, pseudothrombocytopenia, giant platelets, microcytosis,</td><td>PLT aggregation, giant PLTs, microcytic RBCs, fragmented RBCs</td></tr><tr><td>• Hemoglobin</td><td>leukocytosis (lymphocytes>100,000/µL), lipemia, abnormal protein</td><td>lipemia (severe), abnormal protein, leukocytosis (>100,000/uL)</td></tr><tr><td>lutarfaring and share and differential</td><td></td><td></td></tr><tr><td></td><td>Iyse-resistant KBC</td><td>_</td></tr><tr><td>Age- and sex-specific reference ranges</td><td>yes</td><td>yes</td></tr><tr><td>Maximum CBCs per hour/Maximum CBCs and differentials per hour Recommended average frequency of calibration</td><td>100/100 once by year by FSR</td><td>30/30 ner regulatory agency requirements</td></tr><tr><td>Modes calibrated/parameters calibrated</td><td>open-closed/WBC, PLT, RBC, HGB, Hct</td><td>primary, whole blood mode/WBC, RBC, HGB, Hct, PLT</td></tr><tr><td>Frequency of blood/latex controls Minimum specimen volume open/closed/Sample dead volume closed</td><td>per regulatory requirements/none</td><td>per regulatory agency requirements/none</td></tr><tr><td></td><td></td><td></td></tr><tr><td>Tube sampling supported</td><td>yes, diameter 12–15 mm; length <=75 mm</td><td>yes, diameter: 13–15 mm; height: <=75 mm microtubes</td></tr><tr><td>Microsample capability</td><td>ves</td><td>yes ves</td></tr><tr><td>Prepares microscopic slides automatically or flags problems for slide prep</td><td>no</td><td>no</td></tr><tr><td>If automatic slidemaker available, No. installed/list price</td><td></td><td>_</td></tr><tr><td></td><td></td><td></td></tr><tr><td>Archives patient data for later comparison Patient-specific archiving</td><td>yes ves</td><td>yes ves</td></tr><tr><td>Maximum archived data accessible when system online</td><td>10,000 samples</td><td>100 samples</td></tr><tr><td>Memory capacity—numeric results–No. specimens</td><td>10,000 samples</td><td>100 samples</td></tr><tr><td>Stored in conjunction with CBC data</td><td>yes</td><td>yes</td></tr><tr><td>Histo/cytogram images and CBC data printed as one report Sound require one he recolled and retransmitted</td><td>yes</td><td>yes</td></tr><tr><td>Saved data can be sorted for reprocessing or report transmission</td><td>yes</td><td>yes yes</td></tr><tr><td>Performs delta checks</td><td>yes</td><td>yes</td></tr><tr><td>Parameters for flags for holding samples are defined by</td><td>yes ves</td><td>no ves</td></tr><tr><td>Some results can be transmitted to LIS while others held</td><td>yes</td><td>no</td></tr><tr><td>Scattergram display: cell-specific color Histogram display: color with threshold</td><td>yes ves</td><td>no Ves</td></tr><tr><td>Choice of desired specimen and/or result information displayed</td><td>yes</td><td>yes</td></tr><tr><td>LIS interface formats supported</td><td>ASTM 1394 and 1238</td><td>RS-232C</td></tr><tr><td>Information transferred on LIS interface</td><td>numeric and flag results, histograms and scatterplots, instrument to LIS;</td><td>numeric and flag results, histograms and scatterplots, patient demographics,</td></tr><tr><td></td><td>patient demographics, orders, LIS to instrument— broadcast; host query for demographics and orders</td><td>patient orders, host query for patient demographics and orders</td></tr><tr><td>LOINC codes transmitted with results</td><td>yes</td><td>yes</td></tr><tr><td>How labs get LOINC codes for reagent kits</td><td>contact vendor</td><td>contact vendor</td></tr><tr><td>Software features</td><td>enhanced QC, data archiving, data collation from multiple instruments, wide area</td><td>enhanced QC, data archiving</td></tr><tr><td>Interface available or planned to automate appairer handling suctor</td><td>network capabilities</td><td>_</td></tr><tr><td>Bar-code symbologies read on tube</td><td>Codabar, codes 39 and 128, ASTM, interleaved 2 of 5, ITF, NW7</td><td>codes 39 and 128, ASTM, ITF, NW7, JAN-8 and 13</td></tr><tr><td>Accommodates bar-code placement per CLSI standard Auto2A</td><td>yes</td><td>yes</td></tr><tr><td>Time required for maintenance by lab personnel</td><td>daily: <3 minutes</td><td>daily: <2 minutes; weekly: <2 minutes; monthly: <2 minutes</td></tr><tr><td>Onboard maintenance records</td><td>yes -24 hours</td><td>yes</td></tr><tr><td>Onboard diagnostics/limited to software problems</td><td><24 nours yes/no</td><td><24 nours; uepor service no/no</td></tr><tr><td>Manufacturer can perform diagnostics via modem</td><td>yes</td><td>yes</td></tr><tr><td>Acquisition program based on cost-per-reportable result</td><td>ves</td><td>Ves</td></tr><tr><td></td><td>-</td><td></td></tr><tr><td>Distinguishing teatures (supplied by company)</td><td>unique testing parameters: fluorescent optical platelets, IG #&%, RET-He, body fluids (CSF, serous, synovial), WBC/RBC/TC and two-part differential:</td><td>nyurodynamic tocusing, automatic floating discriminators, ISBT-compliant, data masking software for blood donor centers</td></tr><tr><td></td><td>standardized technology, reagents, controls, and operations with other Sysmex</td><td></td></tr><tr><td></td><td>x series analyzers; simplified operations with extended linearities, high- throughput, remote monitoring capabilities</td><td></td></tr><tr><td></td><td>0 r · · · · · · · · · · · · · · · · · ·</td><td></td></tr><tr><td>Note: a dash in liau of an answar means company did not answar question or question is not applicable.</td><td></td><td></td></tr></tbody></table>		

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Part 11 of 14	Sysmex America Tammy Kutz communications@sysmex.com 1 Nelson C. White Pkwy. Mundelein, IL 60060 200 270 7520 www.cvemex.com	Sysmex America Tammy Kutz communications@sysmex.com 1 Nelson C. White Pkwy. Mundelein, IL 60060
Name of instrument First year installed in U.S./outside U.S./No. of units sold in 2009	Sysmex KX-21N 2001/1999/99	800-379-7639 www.sysmex.com Sysmex XE-5000 2008/2008/>125
No. units installed in U.S./outside U.S./List price	>2,000//\$26,780	>450/>1,500/\$265,122
MCH, MCHC, PLT, %&# neut, mono, lymph, eos, baso): • Laboratory	RDW-SD, RDW-CV, MPV	HPC#, MPV, IG%, IG#, RET-He, IPF
• Flags	histogram error flags; WBC, RBC, PLT	PLT clumps, PLT ABN distribution, WBC ABN scattergram, blast, left shift, atyp. lymph., ABN lymph./blast, RBC ABN distribution, RBC lyse resistance, RBC agglut., turbidity
FDA-cleared tests but not clinically released Tests not available but submitted for clearance	— —	— — —
For research use only Tests unique to analyzer	- - -	 reticulocyte hemoglobin, immature platelet fraction, hematopoietic progenitor
		cell, immature reticulocyte fraction, reportable immature granulocyte #&%, RBC/ WBC/TC/two-part differential
Differential method(s) used	direct current (DC)	fluorescent flow cytometry, RF/DC detection method
Linearity: • WBC count (10 ⁹ /L)/RBC count (10 ¹² /L) • Hemoglobin (g/dL)/platelet (10 ⁹ /L)	1.0-99.9/0.3-7.0 0.1-25.0/10-999	0–440/0–8 0–25/0–5,000
MCV (IL) OF HCI (%) Precision: WBC count/RBC count Hemoglobin/platalet	10-60 Hct <=3.5 percent/<=2.0 percent	0–75 (HCT) <3 percent/<1.5 percent
MCV or Hct Accuracy of automated differential compared with manual	<=1.5 percent <=0.0 percent <=2.0 percent Hct NEUT% R=0.98, LYM% R=0.99, MXD % R=0.75, NEUT# R=1.00, LYM# R=1.00,	<1.5 percent (Hct) neut% r=0.95, v=0.92x+5.46; lymph% r=0.95, v=0.88x+2.46; mono% r=0.79,
differential (per CLSI H-20A), regression equation	MXD# R=0.90	y=0.77x+1.88; eos% r=0.92, y=0.97x+0.29; baso% r=0.82, y=1.01x+0.01; NRBC% r=0.96, y=1.12x+0.11; IG% r=0.83, y=0.9332x+0.0922
Interfering substances: • WBC	cold agglutinin, PLT aggregation, erythroblastosis, NRBC, cyroglobulins	cold agglutinins, PLT aggregation, nucleated RBCs, cryoglobulin, lyse-resistant RBCs
• квс • MCV or Hct	Cold aggiutinin, severe microcytosis, traymenteu noc, teurocytosis (>100,000/µL) Het: cold andlutinin, leukocytosis (>100.000/µL), abnormal red cell fragility.	Cold aggiutinins, severe microcytosis, fragmenteu noos, iarge number grant PLTs, in vitro hemolysis Het: cold anniutinins. leukocytosis. ABN red cell fragility, spherocytosis
• Platelet	spherocytosis pseudothrombocytopenia, PLT aggregation, increased microcytosis,	pseudothrombocytopenia, PLT aggregation, increased microcytosis,
Hemoglobin Interfering substances: differential	megalocytic PLTs leukocytosis (>100,000/μL), lipemia, abnormal protein —	megalocytic PLTs lipemia, ABN proteins, leukocytosis (>100,000/µL) lyse-resistant RBCs
Age- and sex-specific reference ranges	yes	yes
Maximum CBCs per hour/Maximum CBCs and differentials per hour Recommended average frequency of calibration	60/60 per regulatory agency requirements	150/150 once per year by FSR once allocad capillary//WBC_BBC_Hb_Hct_PLT
Frequency of blood/latex controls Minimum specimen volume open/closed/Sample dead volume closed	per regulatory agency requirements/none 50 uL/—/—	2 levels once every 24 hours (minimum per CLIA)/none 130 uL/200 µL/1 mL
Tube sampling supported Veterinary capability	yes yes	yes no
Microsample capability Prepares microscopic slides automatically or flags problems for slide prep	yes no	yes yes (with Alpha or HST upgrade)
If automatic slidemaker available, No. installed/list price		>1,200/price depends on configuration
Archives patient data for later comparison Patient-specific archiving	yes yes	yes yes
Maximum archived data accessible when system online Memory capacity—numeric results–No. specimens	300 samples 300 samples	10,000 samples 10,000 samples
Memory capacity—histo/cytograms-No. specimens Stored in conjunction with CBC data Wisto/autorysem impacts and CPC data printed as one report 	300 samples yes	10,000 samples yes
Saved results can be recalled and retransmitted Saved data can be sorted for reprocessing or report transmission	yes yes ves	yes yes ves
Performs delta checks Tags and holds results for followup, confirmatory testing, or rerun	yes yes	yes yes
Parameters for flags for holding samples are defined by Some results can be transmitted to LIS while others held	yes no	yes yes
Scattergram display: cell-specific color Histogram display: color with threshold Choice of desired specimen and/or result information displayed	no yes	yes yes
LIS interface formats supported	yes RS-232C	ASTM 1394. TCP-IP. ASTM E1381
Information transferred on LIS interface	numeric and flag results, histograms and scatterplots, host query for patient demographics and orders	numeric and flag results, histograms and scatterplots, instrument to LIS; patient demographics, orders, LIS to instrument— broadcast; host query for demographics and orders
LOINC codes transmitted with results How labs get LOINC codes for reagent kits	yes contact vendor	yes contact vendor
• Software features	no 	yes, Sysmex WAM (Work Area Manager) enhanced QC, data archiving, data collation from multiple instruments, rules
Interface available or planned to automate specimen-handling system Bar-code symbologies read on tube Accommodates bar-code placement per CLSI standard Auto2A	 codes 39 and 128, ASM, ITF, NW-7, JAN, UPC-A, UPC-E, EAN13, EAN8 yes	Roche Diagnostics, and Labotix, A & T, Thermo, IDS Codabar, codes 39 and 128, ASTM, interleaved 2 of 5, ITF, NW7, EAN 8 and 13 —
Time required for maintenance by lab personnel	daily: <2 minutes; weekly: <2 minutes; monthly: <2 minutes	daily: <3 minutes
Time from communication of problem to engineer on site Onboard diagnostics/limited to software problems Monufacturer can perform diagnostics via modem	<24 hours no/no	ves <24 hours yes/no
Acquisition program based on cost-per-reportable result	ves	ves
Distinguishing features (supplied by company)	automatic floating discriminators	low-end linearity for all body fluids; two-part differential (mono nuclear % + #
		and polymorphonuclear % + # or body fluid; reticulocyte hemoglobin content; immature platelet fractions; throughput of 150 CBCs per hour; random access; discrete testing; online QC; remote diagnostics, body fluid analysis; platelet linearity to 5 million, hematocrit linear to 75 percent; hematopoietic progenitor cell testing; immature granulocyte enumeration; immature platelet fraction; reticulocyte hemoglobin equivalent; standardized reagents, controls, and operations with other Sysmex X series analyzers

Part 12 of 14	Sysmex America Tammy Kutz communications@sysmex.com 1 Nelson C. White Pkwy.	Sysmex America Tammy Kutz communications@sysmex.com 1 Nelson C. White Pkwy.
	800-379-7639 www.sysmex.com/usa	800-379-7639 www.sysmex.com/usa
Name of instrument First year installed in U.S./outside U.S./No. of units sold in 2009 No. units installed in U.S./outside U.S./List price	Sysmex XE-2100 1999/—/>390 1,325/>5,000/\$240,000	Sysmex XE-2100D 2004/2004/>65 190/>790/\$200,000
Test menu: • Chartable (standard menu: WBC, RBC, Hb, Hct, MCV, MCH, MCHC, PLT, %&# neut, mono, lymph, eos, baso):	standard menu (left) plus: NRBC %&#, retic %&#, RDW-SD, RDW-CV, IRF, PLT-O, HPC#, MPV, IG%, IG#, RET-He, IPF</td><td>standard menu (left) plus: RDW-SD, RDW-CV</td></tr><tr><td>• Laboratory • Flags</td><td>— PLT clumps, RBC agglut, turbidity, WBC ABN scattergram, RBC ABN distribution, PLT ABN distribution, RBC lyse resistance, blasts, left shift, atyp. lymph., ABN lymph./blast., reticulocyte ABN scattergram</td><td>— PLT clumps, PLT ABN distribution, WBC ABN scattergram, blast, left shift, atyp. lymph., ABN lymph./blast, RBC ABN distribution, RBC lyse resistance, RBC agglutinins, turbidity</td></tr><tr><td>FDA-cleared tests but not clinically released Tests not available but submitted for clearance Tests in development</td><td></td><td></td></tr><tr><td>For research use only Tests unique to analyzer</td><td>HPC#, IG%, IG#, RET He, IPF</td><td>P-LCR, PCT, PDW optional: IG% & IG#</td></tr><tr><td>Differential method(s) used Linearity: • WBC count (10⁹/L)/RBC count (10¹²/L) • Hemoglobin (g/dL)/platelet (10⁹/L) • MCV (fL) or Hct (%) Precision: • WBC count/RBC count • Hemoglobin/platelet • MCV or Hct Accuracy of automated differential compared with manual differential (per CLSI H-20A), regression equation Interfering substances: • WBC • RBC • MCV or Hct • Platelet • Hemoglobin Interfering substances: differential</td><td>fluorescent flow cytometry, RF/DC detecting method 0-440/0-8 0-25/0-5,000 0-75 (Hct) <3 percent/<1.5 percent <1.0 percent/<4.0 percent <1.5 percent (Hct) neut% r=0.95, y=0.92x+5.46; lymph% r=0.95, y=0.88x+2.46; mono% r=0.79, y=0.77x+1.88; eos% r=0.92, y=0.97x+0.29; baso% r=0.82, y=1.01x+0.01; NRBC% r=0.96, y=1.12x+0.11; IG% r=0.83, y=0.9332x+0.0922 cold agglutinin, PLT aggregation, nucleated RBCs, cryoglobulin, lyse-resistant RBCs cold agglutinins, severe microcytosis, fragmented RBCs, large No. giant PLTs, in vitro hemolysis Hct: cold agglutinins, leukocytosis, ABN red cell fragility, spherocytosis pseudothrombocytopenia, PLT aggregation, increased microcytosis, megalocytic PLTs lipemia, ABN proteins, leukocytosis (>100,000/µL) lyse-resistant RBCs</td><td>fluorescent flow cytometry 0-440/0-8 0-25/0-5,000 0-75 (Hct) ≤3 percent/≤1.5 percent ≤1.0 percent/≤4.0 percent ≤1.5 percent (Hct) neut% r=0.95, y=0.92x+5.46; lymph% r=0.95, y=0.88x+2.46; mon0% r=0.79, y=0.77x+1.88; eos% r=0.92, y=0.97x+0.29; baso% r=0.82, y=1.01x+0.01; NRBC% r=0.96, y=1.12x+0.11; IG% r=0.83, y=0.9332x+0.0922 cold agglutinins, PLT aggregation, cryoglobulin, lyse-resistant RBCs, NRBCs cold agglutinins, severe microcytosis, fragmented RBCs, leukocytosis Hct: cold agglutinins, ABN red cell fragility, spherocytosis, leukocytosis pseudothrombocytopenia, PLT aggregation, increased microcytosis, megaloblasts lipemia, ABN proteins, leukocytosis (>100,000/µL) lyse-resistant RBCs</td></tr><tr><td>Age- and sex-specific reference ranges Maximum CBCs per hour/Maximum CBCs and differentials per hour Recommended average frequency of calibration • Modes calibrated/parameters calibrated Frequency of blood/latex controls Minimum specimen volume open/closed/Sample dead volume closed</td><td>yes 150/150 once per year by FSR open, closed, capillary/WBC, RBC, Hb, Hct, PLT per requirements/none 130 μL/200 μL/1 mL</td><td>yes 150/150 once per year by FSR open, closed, capillary/WBC, RBC, Hb, Hct, PLT per CLIA requirements/none 130 µL/200 µL/1 mL</td></tr><tr><td>Tube sampling supported Veterinary capability Microsample capability Prepares microscopic slides automatically or flags problems for slide prep If automatic slidemaker available, No. installed/list price</td><td>yes no yes yes (with Alpha or HST upgrade) >1,000/price depends on configuration</td><td>yes no yes yes, with Alpha or HST upgrade >1,000/price depends on configuration</td></tr><tr><td>Archives patient data for later comparison Patient-specific archiving Maximum archived data accessible when system online Memory capacity—numeric results—No. specimens Memory capacity—histo/cytograms—No. specimens • Stored in conjunction with CBC data • Histo/cytogram images and CBC data printed as one report Saved results can be recalled and retransmitted Saved data can be sorted for reprocessing or report transmission Performs delta checks Tags and holds results for followup, confirmatory testing, or rerun Parameters for flags for holding samples are defined by Some results can be transmitted to LIS while others held Scattergram display: cell-specific color Histogram display: color with threshold Choice of desired specimen and/or result information displayed</td><td>yes yes 10,000 samples 10,000 samples 10,000 samples yes yes yes yes yes yes user or vendor yes yes yes yes</td><td>yes yes 10,000 samples 10,000 samples 10,000 samples yes yes yes yes yes yes user or vendor yes yes yes yes</td></tr><tr><td>LIS interface formats supported Information transferred on LIS interface</td><td>RS-232C/TCP IP numeric and flag results, histograms and scatterplots, patient demographics, orders</td><td>RS-232C/TCP IP numeric and flag results, histograms and scatterplots, patient demographics, orders</td></tr><tr><td>LOINC codes transmitted with results How labs get LOINC codes for reagent kits Optional data management or collation system • Software features Interface available or planned to automate specimen-handling system Bar-code symbologies read on tube Accommodates bar-code placement per CLSI standard Auto2A</td><td>yes contact vendor yes, Sysmex WAM (Work Area Manager) enhanced QC, data archiving, data collation from multiple instruments, multiple sites on automation platform Codabar, codes 39 and 128, interleaved 2 of 5, ITF, NW7, EAN 8 and 13 yes</td><td>yes contact vendor yes, Sysmex WAM (Work Area Manager) enhanced QC, data archiving, data collation from multiple instruments, multiple sites on automation platform Codabar, codes 39 and 128, ASTM, interleaved 2 of 5, ITF, NW7, EAN 8 and 13, ISBT yes</td></tr><tr><td>Time required for maintenance by lab personnel</td><td>daily: <3 minutes</td><td>daily: <3 minutes</td></tr><tr><td>Onboard maintenance records Time from communication of problem to engineer on site Onboard diagnostics/limited to software problems Manufacturar can perform diagnostics via modern</td><td>yes <24 hours yes also via Internet</td><td>yes <24 hours yes/no</td></tr><tr><td></td><td>yes, also via internet</td><td></td></tr><tr><td>Acquisition program based on cost-per-reportable result Distinguishing features (supplied by company)</td><td>yes throughput of 150 CBCs per hour; random access; discrete testing; online QC; remote diagnostics, body fluid analysis; platelet linearity to 5 million, hematocrit linear to 75 percent; hematopoietic progenitor cell testing; immature granulocyte enumeration; immature platelet fraction; reticulocyte hemoglobin equivalent; standardized reagents, controls, and operations with other Sysmex X series analyzers</td><td>yes 150 CBCs per hour; platelet linearity—5 million, hematocrit extended to 75 percent; standardized technology, reagents, controls and operations; ISBT- compliant; FDA-cleared application for blood component products in specified anticoagulants</td></tr></tbody></table>	

Part 13 of 14	Sysmex America Tammy Kutz communications@sysmex.com 1 Nelson C. White Pkwy. Mundelein, IL 60060 800-379-7639 www.sysmex.com/usa	Sysmex America Tammy Kutz communications@sysmex.com 1 Nelson C. White Pkwy. Mundelein, IL 60060 800-379-7639 www.sysmex.com/usa
Name of instrument First year installed in U.S./outside U.S./No. of units sold in 2009 No. units installed in U.S./outside U.S./List price	Sysmex XE-Alpha N/HST-N 2000/—/>160 >725/1,300/\$360,000–\$1,000,000	Sysmex XT-2000i 2002/2001/>235 >900/>5,200/\$149,500
Test menu: • Chartable (standard menu: WBC, RBC, Hb, Hct, MCV, MCH, MCHC, PLT, %&# neut, mono, lymph, eos, baso):	standard menu (left) plus: NRBC%&#, retic%&#, RDW-SD, RDW-CV, IRF, PLT-0, HPC#, MPV, IG%, IG#, RET-He, IPF</td><td>standard menu (left) plus: retic %&#, IRF, PLT-O, MPV, RDW-SD, RDW-CV, reticulocyte hemoglobin, immature granulocytes %&#</td></tr><tr><td>• Laboratory • Flags</td><td> user-defined, all-inclusive</td><td></td></tr><tr><td>FDA-cleared tests but not clinically released Tests not available but submitted for clearance Tests in development</td><td></td><td>resistance, KBC aggiutinins, turbiolity, NKBC, body huids — — —</td></tr><tr><td>Tests unique to analyzer</td><td>NRBC, HPC#, IG%, IG#, RET-He, immature platelet function (IPF)</td><td>— PLT-0, immature granulocytes (IG) %&#, reticulocyte hemoglobin (RET-He)</td></tr><tr><td>Differential method(s) used</td><td>fluorescent flow cytometry, RF/DC detecting method</td><td>fluorescent flow cytometry</td></tr><tr><td>Linearity: • WBC count (10⁹/L)/RBC count (10¹²/L) • Hemoglobin (g/dL)/platelet (10⁹/L) • MCV (fL) or Hct (%) Precision: • WBC count/RBC count • Hemoglobin/platelet • MCV or Hct Accuracy of automated differential compared with manual differential (per CLSI H-20A), regression equation</td><td>0-440/0-8 0-25/0-5,000 0-75 (Hct) <3 percent/<1.5 percent <1.0 percent/<4.0 percent <1.0 percent (Hct) neut% r=0.95, y=0.92x+5.46; lymph% r=0.95, y=0.88x+2.46; mono% r=0.79, y=0.77x+1.88; eos% r=0.92, y=0.97x+0.29; baso% r=0.82, y=1.01x+0.01; NRBC% r=0.96, y=1.12x+0.11; IG% r=0.83, y=0.9332x+0.0922</td><td>0–310/0–8 0–25/0–5,000 0–60 (Hct) ≤3.0 percent/≤1.5 percent ≤1.5 percent/≤4.0 percent ≤1.5 percent (Hct) neut% r=0.95, y=0.95x+3.38; lymph% r=0.96, y=0.85x+1.67; mono% r=0.90, y=11.37x+1.89; eos% r=0.94, y=0.87x+0.04; baso% r=0.76, y=0.48x+0.24</td></tr><tr><td>Interfering substances: • WBC • RBC</td><td>cold agglutinins, PLT aggregation, nucleated RBCs, cryoglobulins, lyse-resistant RBCs cold agglutinins, severe microcytosis, fragmented RBCs, large No. giant PLTs, in vitro hemolysis</td><td>cold agglutinins, PLT aggregation, cryoglobulins, lyse-resistant RBCs, NRBCs cold agglutinins, severe microcytosis, fragmented RBCs, leukocytosis</td></tr><tr><td>• MCV or Hct • Platelet</td><td>Hct: cold agglutinins, leukocytosis, ABN red cell fragility, spherocytosis pseudothrombocytopenia, PLT aggregation, increased microcytosis, megalocytic PLTs</td><td>Hct: cold agglutinins, ABN red cell fragility, spherocytosis, leukocytosis (>100,000/μL) pseudothrombocytopenia, PLT aggregation, increased microcytosis, megaloblasts</td></tr><tr><td>• Hemoglobin</td><td>lipemia, ABN proteins, leukocytosis (>100,000/µL)</td><td>lipemia, ABN proteins, leukocytosis (>100,000/µL)</td></tr><tr><td>Interfering substances: differential</td><td>lyse-resistant RBCs</td><td>lyse-resistant RBCs</td></tr><tr><td>Age- and sex-specific reference ranges Maximum CBCs per hour/Maximum CBCs and differentials per hour Recommended average frequency of calibration</td><td>yes 150/150 per analyzer on automation system once per year by FSR</td><td>yes 80/80 once per year by FSR</td></tr><tr><td> Modes calibrated/parameters calibrated Frequency of blood/latex controls Minimum specimen volume open/closed/Sample dead volume closed </td><td>open, closed, capillary/WBC, RBC, Hb, Hct, PLT two levels once every 24 hours (minimum CLIA)/none 130 µL/200 µL/1 mL</td><td>open, closed, capillary/— per CLIA requirements/none 85 μL/150 μL/1 mL</td></tr><tr><td>Tube sampling supported Veterinary capability Microsample capability Prepares microscopic slides automatically or flags problems for slide prep</td><td>yes no yes yes</td><td>yes yes, XT-V product yes no</td></tr><tr><td>If automatic slidemaker available, No. installed/list price</td><td>>1,700/\$250,000</td><td>_</td></tr><tr><td>Archives patient data for later comparison Patient-specific archiving Maximum archived data accessible when system online Memory capacity—numeric results–No. specimens Memory capacity—histo/cytograms–No. specimens • Stored in conjunction with CBC data • Histo/cytogram images and CBC data printed as one report Saved results can be recalled and retransmitted Saved data can be sorted for reprocessing or report transmission Performs delta checks Tags and holds results for followup, confirmatory testing, or rerun Parameters for flags for holding samples are defined by Some results can be transmitted to LIS while others held Scattergram display: color with threshold Choice of desired specimen and/or result information displayed</td><td>yes yes 10,000 samples 10,000 samples; 20,000 orders 10,000 samples; two years plus, with optional decision logic software yes yes yes yes yes user and vendor yes yes yes yes yes</td><td>yes yes 10,000 samples 10,000 samples yes yes yes yes yes yes user or vendor yes yes yes yes yes yes</td></tr><tr><td>LIS interface formats supported Information transferred on LIS interface</td><td>RS-232C/TCP IP numeric and flag results, histograms and scatterplots, patient demographics,</td><td>RS-232/TCP-IP, ASTM numeric and flag results, histograms and scatterplots, patient demographics,</td></tr><tr><td>LOINC codes transmitted with results How labs get LOINC codes for reagent kits Optional data management or collation system • Software features</td><td>orders yes contact vendor yes, Sysmex WAM (Work Area Manager) enhanced QC, data archiving, data collation from multiple instruments, multiple sites</td><td>orders yes contact vendor yes, Sysmex WAM (Work Area Manager) enhanced QC, data archiving, data collation from multiple instruments</td></tr><tr><td>Interface available or planned to automate specimen-handling system Bar-code symbologies read on tube Accommodates bar-code placement per CLSI standard Auto2A</td><td>Roche, Labotix, IDS, A&T, Thermo engen Codabar, codes 39 and 128, interleaved 2 of 5, ITF, NW7, EAN 8 and 13 yes</td><td> Codabar, codes 39 and 128, interleaved 2 of 5, ITF, NW7, EAN 8 and 13 yes</td></tr><tr><td>Time required for maintenance by lab personnel Onboard maintenance records Time from communication of problem to engineer on site Onboard diagnostics/limited to software problems Manufacturer can perform diagnostics via modem</td><td>daily: <three minutes (operator time) yes <24 hours yes/no yes, also via Internet</td><td>daily: <three minutes yes <24 hours yes/no yes, also via Internet</td></tr><tr><td>Acquisition program based on cost-per-reportable result</td><td>yes</td><td>yes</td></tr><tr><td>Note: a dash in lieu of an answer means company did not answer question or question is not applicable</td><td>nign-throughput, tiexible, scalable configurations available (>125 standard configurations available); platelet linearity—5 million; new parameters for platelet monitoring—IPF and reticulocyte Hb measurement and RET-He, hematopoietic progenitor cell analysis, lavender top management, standardized technology, reagents, controls, and operations; broader clinical reportable ranges; enhanced clinical parameters to support preventive care and disease management</td><td>nign throughput, remote diagnostics; online QC; random access; fluorescent optical platelets; discrete testing; reagent monitoring; customized chartable report formats; body fluids, standardized technology, reagents, controls, and operations with other X series analyzers; IG # & %, RET-He; XT-V unit for use in toxicology, research, and veterinary reference labs</td></tr><tr><td>Tabulation does not represent an endorsement by the College of American</td><td>Pathologists.</td><td></td></tr></tbody></table>	

Part 14 of 14	Sysmex America Tammy Kutz communications@sysmex.com 1 Nelson C. White Pkwy. Mundelein, IL 60060	Sysmex America Tammy Kutz communications@sysmex.com 1 Nelson C. White Pkwy. Mundelein, IL 60060
	800-379-7639 www.sysmex.com/usa	800-379-7639 www.sysmex.com/usa
Name of instrument First year installed in U.S./outside U.S./No. of units sold in 2009 No. units installed in U.S./outside U.S./List price	Sysmex XT-1800i 2002/2001/>125 >900/4,600/\$128,750	XS-1000i and XS-1000i AutoLoader (20 sample autoloader option) 2006/2005/>320 >1,080/>6,000/\$85,000 (XS-1000i) \$95,000 (AutoLoader)
Test menu: • Chartable (standard menu: WBC, RBC, Hb, Hct, MCV, MCH, MCHC, PLT, %&# neut, mono, lymph, eos, baso):	standard menu (left) plus: MPV, RDW-SD, RDW-CV, immature granulocytes %&#</td><td>standard menu (left) plus: MPV, RDW-SD, RDW-CV</td></tr><tr><td>• Laboratory • Flags</td><td>— PLT clumps, PLT ABN distribution, WBC ABN scattergram, blast imm. gran., left shift, atyp. lymph., ABN lymph./blasts, RBC ABN distribution, RBC lyse resistance, RBC agglutinins, turbidity, NRBC, body fluids</td><td>— PLT clumps, PLT ABN distribution, WBC ABN scattergram, blast imm. gran., left shift, atyp. lymph., ABN lymph./blasts, RBC ABN distribution, RBC lyse resistance, RBC agglutinins, turbidity, NRBC</td></tr><tr><td>FDA-cleared tests but not clinically released Tests not available but submitted for clearance Tests in development</td><td></td><td></td></tr><tr><td>For research use only</td><td>_</td><td>research screen</td></tr><tr><td>Tests unique to analyzer</td><td>immature granulocytes (IG%&#)</td><td>-</td></tr><tr><td>Differential method(s) used</td><td>fluorescent flow cytometry</td><td>fluorescent flow cytometry</td></tr><tr><td>Linearity: • WBC count (10⁹/L)/BBC count (10¹²/L)</td><td>0-310/0-8</td><td>0-400/0-8</td></tr><tr><td>Hemoglobin (g/dL)/platelet (10⁹/L)</td><td>0-25/0-5,000</td><td>0-25/0-5,000</td></tr><tr><td>MCV (fL) or Hct (%) Precision: WBC count/RBC count</td><td>0–60 (Hct) <3.0 percent/<1.5 percent</td><td>0–60 (Hct) —/—</td></tr><tr><td>Hemoglobin/platelet</td><td>≤1.5 percent/≤4.0 percent</td><td>_/_</td></tr><tr><td>MCV or Hct Accuracy of automated differential compared with manual</td><td>≤1.5 percent (Hct) neut% r=0.95, y=0.95x+3.38; lymph% r=0.96, y=0.85x+1.67; mono% r=0.90,</td><td> neut% r=0.96, y=0.9074x+3.8948; lymph% r=0.97, y=0.9017x+2.4817; mono%</td></tr><tr><td>differential (per CLSI H-20A), regression equation</td><td>y=11.37x+1.89; eos% r=0.94, y=0.87x+0.04; baso% r=0.76, y=0.48x+0.24</td><td>r=0.78, y=0.8626x+3.5938; eos% r=0.94, y=0.9076x+0.3651; baso% r=0.29, y-0.1538x+0.298</td></tr><tr><td>Intertering substances: • WBC</td><td>Cold agglutinins, PLI aggregation, cryogiobullins, lyse-resistant nous, innous</td><td>Cold agglutinins, PLI aggregation, cryogiobullins, lyse-resistant nous, innous</td></tr><tr><td>• KBU</td><td>Cold agglutinins, severe microcytosis, iraginenteu noos, teunocytosis</td><td>Cold agglutinins, severe microcytosis, iraginenieu nous, ieukucytosis</td></tr><tr><td>• MUV OF NGL</td><td>HCC Cold aggiutinins, Abn red cell fraginity, spilerocytosis, reukocytosis (>100,000/µL)</td><td>HCC: Colo aggiutinins, Abn red cell iraginity, spilerocytosis, leukocytosis (>100,000/μL)</td></tr><tr><td>• Fidelet</td><td>pseudothromoocytopenia, PLT aggregations, increased incrocytosis, megaloblasts</td><td>pseudoinformodytopenia, PLT aggregation, increased incrocytosis, megaloblasts</td></tr><tr><td>• nemographin</td><td>inperina, Abn proteins, ieukocytosis (>100,000/µL)</td><td>inpennia, Adm proteinis, ieukocytosis (> 100,000/µL)</td></tr><tr><td></td><td>iyse-resistant RBCS</td><td>iyse-resistant hbus</td></tr><tr><td>Age- and sex-specific reference ranges Maximum CBCs per hour/Maximum CBCs and differentials per hour Recommended average frequency of calibration • Modes calibrated/parameters calibrated Frequency of blood/latex controls Minimum specimen volume open/closed/Sample dead volume closed Tube sampling supported Veterinary capability</td><td>yes 80/80 once per year by FSR open, closed, capillary/— per CLIA requirements/none 85 μL/150 μL/1 mL yes yes, XT-V product</td><td>yes 60/60 once per year closed and capillary/— per CLIA requirements/none 20 μL/20 μL/1.0 mL yes (up to 85 mm height) no</td></tr><tr><td>Prepares microscopic slides automatically or flags problems for slide prep</td><td>yes no</td><td>yes no</td></tr><tr><td>If automatic slidemaker available, No. installed/list price</td><td>_</td><td>_</td></tr><tr><td>Archives patient data for later comparison</td><td>yes</td><td>yes</td></tr><tr><td>Patient-specific archiving Maximum archived data accessible when system online</td><td>yes 10,000 samples</td><td>yes 10.000 samples</td></tr><tr><td>Memory capacity—numeric results-No. specimens</td><td>10,000 samples</td><td>10,000 samples</td></tr><tr><td>Memory capacity—nisto/cytograms–No. specimens Stored in conjunction with CBC data</td><td>yes</td><td>10,000 samples yes</td></tr><tr><td>Histo/cytogram images and CBC data printed as one report Saud results can be recalled and retransmitted</td><td>yes</td><td>yes</td></tr><tr><td>Saved data can be sorted for reprocessing or report transmission</td><td>yes</td><td>yes</td></tr><tr><td>Performs delta checks Tags and holds results for followup, confirmatory testing, or rerup</td><td>yes ves</td><td>yes ves</td></tr><tr><td>Parameters for flags for holding samples are defined by</td><td>user or vendor</td><td>user or vendor</td></tr><tr><td>Some results can be transmitted to LIS while others neid Scattergram display: cell-specific color</td><td>yes ves</td><td>yes ves</td></tr><tr><td>Histogram display: color with threshold Choice of desired specimen and/or result information displayed</td><td>yes ves</td><td>yes ves</td></tr><tr><td>LIS interface formats supported Information transferred on LIS interface</td><td>RS-232C/TCP-IP, ASTM numeric and flag results, histograms and scatterplots, patient demographics, orders</td><td>proprietary, ASTM 1394, TCP-IP numeric and flag results, histograms and scatterplots, patient demographics, orders</td></tr><tr><td>LOINC codes transmitted with results</td><td>VAC</td><td>Noe</td></tr><tr><td>How labs get LOINC codes for reagent kits</td><td>contact vendor</td><td>contact vendor</td></tr><tr><td>Optional data management or collation system Software features </td><td>yes, Sysmex WAM (Work Area Manager) enhanced QC, data archiving, data collation from multiple instruments, multiple</td><td>yes, Sysmex WAM (Work Area Manager) enhanced QC, data archiving, data collation from multiple instruments, multiple</td></tr><tr><td>Interface available or planned to automate specimen-handling system Bar-code symbologies read on tube Accommodates bar-code placement per CLSI standard Auto2A</td><td>sites — Codabar, codes 39 and 128, interleaved 2 of 5, ITF, NW7, EAN 8 and 13 yes</td><td>sites — Codabar, codes 39 and 128, ASTM, interleaved 2 of 5, NW7, EAN 8 and 13, ITF yes</td></tr><tr><td>Time required for maintenance by lab personnel</td><td>daily: <three minutes</td><td>daily: three minutes: weekly: none: monthly: nine minutes</td></tr><tr><td>Onboard maintenance records</td><td>yes</td><td>yes</td></tr><tr><td>Time from communication of problem to engineer on site Onboard diagnostics/limited to software problems</td><td><24 hours ves/no</td><td><24 hours ves/no</td></tr><tr><td>Manufacturer can perform diagnostics via modem</td><td>yes, also via Internet</td><td>yes, also via Internet</td></tr><tr><td>Acquisition program based on cost-per-reportable result</td><td>yes</td><td>yes</td></tr><tr><td>Distinguishing features (supplied by company)</td><td>remote diagnostics; online QC; random access; discrete testing; reagent monitoring; chartable report formats; unique specimen-gating, software is FDA Part II compliant; body fluids now FDA cleared; standardized technology, reagents, controls, and operations with other X series analyzers; XT-V for use in toxicology, research, and veterinary reference labs</td><td>standardized technology, reagents, controls, and operations to other X series analyzers; small sample volume requirements for CBC and five-part differential; remote diagnostics, online QC, discrete analysis, reagent monitoring, chartable report; remote calibration verification</td></tr></tbody></table>	