# **AMS**

# **UREA U.V.**



# Enzymatic method for the quantitative determination of Urea in serum, plasma and urine

IVD

# **ORDER INFORMATION**

REF Kit size
GA4960 00 10x40 + 5x20 ml
KL4960 00 10x40 + 10x10 ml
BK4960 00 5x(60+15 ml)

#### **INDICATION**

Urea concentration is an indicator of kidney function. Conditions associated to high urea values are related to iperuremia and azotemia.

## **METHOD PRINCIPLE**

Urease hydrolyzes urea into ammonia and carbon dioxide. Glutamate dehydrogenase catalyzes the reaction of ammonia with 2-ketoglutarate and oxidizes NADH into NAD<sup>+</sup>.

Urea +  $2 H_2O$  <u>Urease</u>>  $2 NH_4^+ + 2 HCO_3^-$ 2-Ketoglutarate +  $NH_4^+ + NADH$  <u>GLDH</u> > L-Glutammate +  $NAD^+ + H_2O$ 

The decrease of absorbance of NADH, measured at 340 nm, is proportional to the urea present in the sample.

# **COMPOSITION**

# REAGENT A:

TRIS pH 7.8 150 mmol/l 2-Ketoglutarate 8.75 mmol/l ADP 0.75 mmol/l Urease  $\geq$  7.5 kU/l GLDH (Glutamate-dehydrogenase)  $\geq$  1.25 kU/l Sodium azide  $\leq$  0.95 g/l

# REAGENT B:

 $\begin{array}{ll} \text{NADH} & \text{1.32 mmol/l} \\ \text{Sodium azide} & \leq 0.95 \text{ g/l} \end{array}$ 

**STANDARD**: 1x5 ml Urea 50 mg/dl Verified against NIST reference material.

# PREPARATION OF REAGENTS

# Bireagent procedure:

The reagents are liquids ready to use.

# Monoreagent procedure:

Mix 4 parts of Reagent A and 1 part of Reagent B to obtain the working reagent (e.g. 20 ml of RA + 5 ml of RB). Let stand working reagent at least 30 minutes at room temperature before use.

# Storage and stability

Store at 2-8 °C. Do not freeze the reagents! The reagents are stable up to the expiry date stated on the label, if contamination and evaporation are avoided, protected from light. The above conditions are valid if the vials are opened just only for the time to take the reagent, closed immediately with their cap and stored at the indicated conservation temperature.

Working reagent is stable for 28 days at 2-8 °C or 5 days at 15-25 °C, protected from light.

# **ANCILLARY EQUIPMENT**

- Automatic pipettes
- Photometer
- Analysis cuvettes (optical path = 1 cm)
- Temperature controlled water bath
- NaCl solution 9 g/l

## **SAMPLES**

Serum, plasma, 24h urine.

Do not use anticoagulants containing fluoride or ammonium ions.

Dilute urine 1:20 with distilled water.

Stability:	Temperature			
	20-25 °C 4-8 °C		- 20 °C	
Serum/plasma:	7 days	7 days	1 year	
Urine:	2 days	7 days	1 month	

# **Specimen collection / Preanalytical factors**

It is recommended that specimen collection should be carried out in accordance with NCCLS Document H11-A3.

# **INTERNAL QUALITY CONTROL**

It is recommended to use commercial Quality Control sera with known urea concentration. Check that the values obtained are within the reference range provided.

# **ANALYTICAL PROCEDURE**

Working temperature 37 °C

Wavelength 340 nm (334 nm, 365 nm)

Optical path 1 cm

Reaction fixed time (decrease)

Allow the reagents to reach working temperature before using.

# **Bireagent procedure**

Pipette into disposable or well clean cuvettes:

	Blank	Standard	Sample		
Reagent A	800 μΙ	800 μl	800 μl		
Standard	-	10 μl	-		
Sample	1	1	10 μl		
Mix and incubate for 5 minutes at 37 °C. Then add:					
Reagent B	200 μl	200 μl	200 μl		

Mix, incubate for 30 seconds at 37 °C, than read  $A_1$  of sample, standard and Blank. After precisely 60 seconds read absorbance  $A_2$ .

Determine:

 $\Delta A = [(A_1 - A_2) \text{ sample or standard}] - [(A_1 - A_2) \text{ Blank}]$ 

# Monoreagent procedure

Pipette into disposable or well clean cuvettes:

	Bianco	Standard	Campione
Working reagent	1000 μΙ	1000 μl	1000 μΙ
Standard	-	10 μl	-
Sample	1	1	10 μl

Mix, incubate for 30 seconds at 37 °C, than read  $A_1$  of sample, standard and Blank. After precisely 60 seconds read absorbance  $A_2$ .

Determine:

 $\Delta A = [(A_1 - A_2) \text{ sample or standard}] - [(A_1 - A_2) \text{ Blank}]$ 

## Note

• Reaction volumes can be proportionally changed.

 The method is optimized for "two points" determinations. It is absolutely necessary to incubate reagent blank, standard and samples exatly for the same time. The same preincubation time for reagent blank, standard and sample is also necessary.

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## **CALCULATION OF RESULTS**

Serum-plasma:

Urea, mg/dl =  $\frac{\Delta A \text{ sample}}{\Delta A \text{ standard}} \times 50$ 

Urine (when 24h diuresis is known):

Urea, g/24h =  $\frac{\Delta A \text{ sample}}{\Delta A \text{ standard}} \times 10 \times I/24h$ 

# **Conversion factor**

Urea  $[mg/dl] \times 0.1665 = Urea [mmol/l]$ Urea  $[mg/dl] \times 0.467 = BUN* [mg/dl]$ 

\* Blood Urea Nitrogen

# **REFERENCE VALUES**

Serum-plasma:  $18 \div 53 \text{ mg/dl (adults)}$ Urine 24h:  $6 \div 17 \text{ mg/24h}$ 

Each laboratory should establish reference ranges for its own patients population.

# **ANALYTICAL PERFORMANCES**

# Precision

Within-run and between-run coefficients of variation have been calculated on replicates of two sera with different urea concentration. The obtained results are reported in the following table:

		Within-run		Between-run	
Sample	Mean (mg/dl)	SD	%CV	SD	%CV
Siero 1	42.8	1.54	3.6	1.50	3.5
Siero 2	161.7	3.60	2.2	7.51	4.6

# Linearity

The assay is linear up to 300 mg/dl.

## Sensitivity

Test sensitivity, in terms of limit of detection, is 2 mg/dl.

## Correlation

A correlation study comparing the present method and a commercial one gave the following results:

y = 1.0436x - 1.1064 mg/dl r = 0.9924

## **Interferences**

Hemoglobin > 500 mg/dl
Bilirubin > 40 mg/dl
Triglycerides > 2000 mg/dl
Ascorbic acid > 30 mg/dl

# **PRECAUTIONS IN USE**

The reagents contain inactive components such as preservatives (Sodium azide or others), surfactants etc. The total concentration of these components is lower than the limits reported by 67/548/EEC and 88/379/EEC directives about classification, packaging and labelling of dangerous substances. However, the reagents should be handled with caution, avoiding swallowing and contact with skin, eyes and mucous membranes. The use of laboratory reagents according to good laboratory practice is recommended.

# **Waste Management**

Please refer to local legal requirements.

# **BIBLIOGRAPHY**

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Via E. Barsanti 17/A 00012 Guidonia (Rome) – Italy Ph. + 39 0774 354441 r.a. Fax + 39 0774 578035 www.ams-analyzers.com info@ams-analyzers.com Via Galileo Galilei, 38
Seggiano di Pioltello (MI) - Italy
Ph. + 39 02 929189.1
Fax + 39 02 929189.39

Fir. + 39 02 929189.19 Fax + 39 02 929189.39 www.gdsrl.com infodiagnostics@ams-analyzers.com Pag. 2/2

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