

PF-PTD-456

i-Stat (POCT) Blood Gas & Chemistry

POCT Equipment Abbott i-Stat Alinity

Clinical Indications Production of rapid quantitative blood gas (and haemoglobin derivative) results

may be used for the assessment of oxygenation and acid-base status in respiratory, metabolic, or renal disorders. Basic chemistry parameters can be assessed outside of the laboratory setting in appropriate circumstances such as assessment of the

deteriorating patient.

Sample Type Capillary whole blood collected into a heparinised plastic capillary or heparinised

venous or arterial whole blood collected into a lithium heparin blood gas syringe.

Sample container Heparinised blood gas syringe or heparinised plastic capillary.

Sample volume Sample volume required for analysis is 95μL.

Any air introduced during sample collection must be expelled.

Sample Handling Samples must be well mixed by rolling or gently inverting the sample several times

to ensure heparin distribution and prevention of clotting in the sample.

Capillary samples must be analysed immediately and syringe samples within 20

minutes.

Special precautions The person who collects the blood sample should be the person to analyse the

sample.

When drawing blood samples with a syringe from a saline filled catheter, withdraw

the saline first and make sure only whole blood is sampled for analysis.

Syringes without anticoagulant are not to be used for blood gas sampling.

Lithium heparin or balanced heparin salts are the only acceptable anticoagulants

for blood gas.

Turnaround time Results are produced by the analyser within 3 minutes of sample introduction.

Reference range pH 7.35 - 7.45



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 $\begin{array}{lll} \mbox{Potassium} & 3.5 - 5.3 \mbox{ mmol/L} \\ \mbox{Calcium} & 1.12 - 1.32 \mbox{ mmol/L} \\ \mbox{Chloride} & 95 - 108 \mbox{ mmol/L} \\ \mbox{Urea} & 2.5 - 6.5 \mbox{ mmol/L} \\ \mbox{Creatinine} & 45 - 117 \mbox{ µmol/L} \\ \mbox{tHb} & 115 - 174 \mbox{ g/L} \\ \mbox{Hct} & 35 - 50 \mbox{ \%} \end{array}$

Limitations

Values which suggest a request for blood transfusion must be confirmed by the haematology laboratory.

Samples can only be used once.

If the test result is questionable or if clinical signs and symptoms appear inconsistent with the test result, re-test with a fresh sample or certain parameters may be confirmed by sending a sample to the laboratory.

Training

The test should only be carried out by a trained member of staff. If you have not been trained, please see your ward-based link nurse, or contact the POCT team mse.POCT.btuh@nhs.net or mse.POCT.suhft@nhs.net