

**Intended Use:**

Kit for the quantitative determination of albumin in human serum and plasma.

**Clinical Significance:**

Hypoalbuminemia is found in any liver impairment (e.g. hepatitis), nephrosis, certain chronic diseases (e.g. rheumatoid arthritis), malnutrition, severe hemorrhage and pregnancy. Lowering of serum albumin usually results in lowering of A/G (Albumin/Globulin) ratio. Elevated serum albumin levels apart from indicating dehydration are generally of little significance.

**Principle:**

Albumin binds with Bromocresol green Green (BCG) in a buffered medium to produce a green colored complex. The intensity of this color is proportional to the Albumin concentration.

**Storage and Stability**

All the reagents are to be stored at 2-8°C and are stable till the expiry date mentioned on the label.

**Specimen:**

Serum / Heparinised or EDTA Plasma.

**Procedure:**

Pipette into test tubes labelled Blank (B), Standard (S) and Test (T) as follows:

Reagent	B	S	T
1. Albumin Reagent	1.0 ml	1.0 ml	1.0 ml
2. Albumin Standard (Conc. 4 gm/dL)	-	10 µl	-
Specimen	-	-	10 µl

Mix well and Incubate at Room Temperature for 5 Minutes.

Read absorbance of Standard (S) and Test (T) against Blank (B) at 578 nm. (570-630).

**Calculations:**

$$1. \text{ Albumin (Ab)} = \frac{\text{Abs. of T}}{\text{Abs. of S}} \times 4 \text{ (in gm/dl)}$$

$$2. \text{ Globulin} = \text{Total Protein} - \text{Albumin}$$

$$3. \text{ A/G Ratio} = \frac{\text{Albumin in gm/dl}}{\text{Globulin in gm/dl}}$$

**Note :** To calculate Globulin and A/G Ratio user should estimate total protein concentration of the sample also using High-Q Total Protein- ML kit.

**Normal Range:**

Albumin	:	3.5–5.4 gm/dL
Globulin	:	2.3–3.6 gm/dL
A/G Ratio	:	1.0–2.3 gm/dL

It is recommended that laboratories establish their own normal range.

**System Parameters:**

Reaction type	:	End Point
Reaction Slope	:	Increasing
Wave length	:	578 nm (570-630)
Flow cell Temp.	:	37°C
Sample volume	:	10 µl
Reagent volume	:	1000 µl
Standard concentration	:	4
Units	:	gm/dl
Blanking with	:	Reagent
Low normal	:	3.5
High normal	:	5.4
Linearity	:	10

### Quality Control:

To ensure adequate quality control, the use of commercial reference control serum is recommended with each assay batch. Use of Quality Control material checks both, the instrument and the reagent functions.

### Notes:

1. In Albumin assay, standard controls containing human Albumin are to be employed with this procedure, since the absorptivity of the BCG Albumin complex differs for Albumin of different species.
2. If a large volume of reagent is required for absorbance reading, requisite volumes can be taken in multiples keeping the same ratio of reagents to specimen / standard.
3. As with all the diagnostic procedures, the Physician should evaluate data obtained by the use of this kit in light of other clinical information.

### References:

1. Doumas, B.T. (1971) Clin. Chem Acta 31, 87.
2. Doumas, B.T. (1978) Clin. Chem Acta 23, 663
3. Webster, O. (1977) Clin. Chem 21, 1159 N.

### Ordering Information

Ref./Cat. No.	Pack Size	Presentation
P-ALB-200	2 x 100 ml	Mono Reagent
















### Product Features

- Liquid Stable, Ready to use Mono Reagent
- One step End Point assay
- Aqueous Albumin standard provided (Standard Conc: 4gm/dL)
- Linearity: 10 gm/dL
- Measuring Wavelength 578 nm (570 – 630 nm)
- Serum or Heparinized/EDTA Plasma as Specimen
- Available as multipurpose reagents and dedicated system packs



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### Symbols used with IVD devices

	Date of manufacture		Manufactured by
	In vitro diagnostic device		Keep away from sunlight
	Do not freeze		This way up
	Use by (yyyy-mm-dd or mm/yyyy)		Reagent
	Calibrator Material		Batch code
	Temperature limitation (store at)		Control
	Consult instructions for use		Keep dry Keep away from rain
	Catalog Number		

eIFU Indicator



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Manufactured in India by :  
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