



**Calibrator Name** LZI Hydrocodone 300 **Qualitative Calibrator** **Ref** C68830

Refer to the package insert for information on intended use, reagent storage, and additional performance data.

[illegible]

PRD/0201-28.DxC500AU.DAU.HYD.300.Global Rev.5



Reagent Name Hydrocodone 300 C/O REF C68823 DxC 500 AU and DxC 500i Urine Settings

Calibrator Name LZI Hydrocodone 300 Qualitative Calibrator Ref C68830

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| PROZONE CHECK PARAMETERS               |                                 |                                          |                                |                                        |                                 |                 |                                |                                        |                                 |                 |                                |
|----------------------------------------|---------------------------------|------------------------------------------|--------------------------------|----------------------------------------|---------------------------------|-----------------|--------------------------------|----------------------------------------|---------------------------------|-----------------|--------------------------------|
| <input type="checkbox"/> Logic Check 1 |                                 |                                          |                                | <input type="checkbox"/> Logic Check 2 |                                 |                 |                                | <input type="checkbox"/> Logic Check 3 |                                 |                 |                                |
| Check Points                           |                                 | Decision Values                          |                                | Check Points                           |                                 | Decision Values |                                | Check Points                           |                                 | Decision Values |                                |
| Point 1                                | <input type="text" value="0"/>  | Value 1                                  | <input type="text" value="0"/> | Point 1                                | <input type="text" value="0"/>  | Value 1         | <input type="text" value="0"/> | Point 1                                | <input type="text" value="0"/>  | Value 1         | <input type="text" value="0"/> |
| Point 2                                | <input type="text" value="0"/>  | Value 2                                  | <input type="text" value="0"/> | Interval                               | <input type="text" value="1"/>  | Value 2         | <input type="text" value="0"/> | Interval                               | <input type="text" value="1"/>  | Value 2         | <input type="text" value="0"/> |
| Point 3                                | <input type="text" value="0"/>  | Value 3                                  | <input type="text" value="0"/> |                                        |                                 |                 |                                |                                        |                                 |                 |                                |
| Limit Points                           |                                 |                                          |                                | Limit Points                           |                                 |                 |                                | Limit Points                           |                                 |                 |                                |
| Limit 1                                | <input type="text" value="0"/>  |                                          |                                | Limit 1                                | <input type="text" value="0"/>  |                 |                                | Limit 1                                | <input type="text" value="0"/>  |                 |                                |
| Limit 2                                | <input type="text" value="27"/> |                                          |                                | Limit 2                                | <input type="text" value="27"/> |                 |                                | Limit 2                                | <input type="text" value="27"/> |                 |                                |
| Check Pattern                          |                                 |                                          |                                |                                        |                                 |                 |                                |                                        |                                 |                 |                                |
| Pattern                                |                                 | <input type="text" value="Pattern 1 ▼"/> |                                |                                        |                                 |                 |                                |                                        |                                 |                 |                                |

**Reagent Name Hydrocodone 300 S/Q REF C68823 DxC 500 AU and DxC 500i Urine Settings****Calibrator Name LZI Hydrocodone 300 Semi-Quantitative Calibrator****Ref C68807, C68831**

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**TEST CONFIGURATION & CHEMISTRY DETAILS**

|                          |                                        |                                         |                                        |                                                                                                   |
|--------------------------|----------------------------------------|-----------------------------------------|----------------------------------------|---------------------------------------------------------------------------------------------------|
| Assay Name               | Test                                   | Rev                                     | Discipline                             | Chemistry                                                                                         |
| Test ID                  | HYD300-                                |                                         | Calculated Result                      | <input type="checkbox"/>                                                                          |
| LIS Code                 | HYD300-                                |                                         | Result Type                            | Semi-Quantitative                                                                                 |
| UNITS AND RANGE SETTINGS |                                        |                                         |                                        |                                                                                                   |
| Use Settings from        | None                                   | Units                                   | ng/mL                                  | Decimal Places                                                                                    |
| Test Kind                | General                                | Revision                                | 05                                     | <input checked="" type="checkbox"/> Multi Reagent Switch                                          |
| Reagent Name             | HYD                                    | Reagent ID                              | 249                                    | <input type="checkbox"/> FSE Test                                                                 |
| ABB Name                 | HYD2G                                  | Parameter Long Name                     | Hydrocodone 300 S/Q C68823 HYD2G Urine |                                                                                                   |
| Region                   | <input checked="" type="checkbox"/> US | <input checked="" type="checkbox"/> OUS | <input checked="" type="checkbox"/> AP | <input type="checkbox"/> JP <input checked="" type="checkbox"/> EU <input type="checkbox"/> Other |

**GENERAL PARAMETERS**

|                 |                   |       |    |           |     |    |                            |                                            |         |        |        |       |
|-----------------|-------------------|-------|----|-----------|-----|----|----------------------------|--------------------------------------------|---------|--------|--------|-------|
| SAMPLE VOLUME   | Sample Volume     | 12    | µL | Dilution  | 0   | µL | REACTION OD LIMIT          | Min. OD                                    | -2.0000 | Max OD | 3.0000 |       |
|                 | Pre-Dilution Rate | 1     |    |           |     |    | REACTION BLANK OD LIMIT    | First: Low                                 | -2.0000 | High   | 3.0000 |       |
| REAGENT VOLUME  | R1 (R1-1)         | 120   | µL | Dilution  | 0   | µL |                            | Last: Low                                  | -2.0000 | High   | 3.0000 |       |
|                 | R1-2              |       | µL | Dilution  |     | µL | ANALYTICAL MEASURING RANGE | Low                                        | 150.0   | High   | 800.0  |       |
|                 | R2 (R2-1)         | 45    | µL | Dilution  | 10  | µL | MANUFACTURER FACTOR        | A                                          | 1       | B      | 0      |       |
| WAVELENGTH      | Primary           | 340   | nm | Secondary | 410 | nm | REAGENT ONBOARD STABILITY  |                                            | 86      | Days   | 0      | Hours |
| METHOD          |                   | FIXED |    |           |     |    | LIH INFLUENCE CHECK        | <input type="checkbox"/> Perform LIH Check |         |        |        |       |
| REACTION SLOPE  |                   | +     |    |           |     |    | Lipemia                    | +                                          |         |        |        |       |
| MEASURING POINT | Point 1: First    | 14    |    | Last      | 18  |    | Icterus                    | +                                          |         |        |        |       |
|                 | Point 2: First    |       |    | Last      |     |    | Hemolysis                  | +                                          |         |        |        |       |
| Linearity Limit |                   |       | %  |           |     |    |                            |                                            |         |        |        |       |
| Lag Time Check  |                   |       |    |           |     |    |                            |                                            |         |        |        |       |
|                 |                   |       |    |           |     |    |                            |                                            |         |        |        |       |

**CALIBRATION PARAMETERS**

|                                                 |               |                  |          |                                                               |                                             |        |                  |                   |          |
|-------------------------------------------------|---------------|------------------|----------|---------------------------------------------------------------|---------------------------------------------|--------|------------------|-------------------|----------|
| Base Unit                                       | Decimal Place | Unit1            | Factor 1 | Unit 2                                                        | Factor 2                                    | Unit 3 | Factor 3         | Unit 4            | Factor 4 |
| ng/mL                                           | 1             | None             | 0        | None                                                          | 0                                           | None   | 0                | None              | 0        |
| CALIBRATOR SPECIFIC                             |               |                  |          |                                                               | CALIBRATION OD AND CONCENTRATION PARAMETERS |        |                  |                   |          |
| Calibration Type                                | 5AB           | Counts           | 2        | <input type="checkbox"/> Use highest calibrator for Upper AMR |                                             |        |                  |                   |          |
| Formula                                         | Polygonal     | MB Factor        |          | Point 1                                                       | Calibrator Name                             | Conc.  | Factor Range Low | Factor Range High |          |
| Calibrator Name                                 | Add           | Positive Cutoff  | 300.0    | Point 2                                                       | #                                           | 0.0    | -2.0000          | 3.0000            |          |
| <input checked="" type="checkbox"/> SLOPE CHECK | Slope Check   | Number of Levels | 5        | Point 3                                                       | #                                           | 150.0  | -2.0000          | 3.0000            |          |
| STABILITY AND INTERVAL                          |               |                  |          | Point 4                                                       | #                                           | 300.0  | -2.0000          | 3.0000            |          |
| Reagent Blank Stability                         | 8             | Days             | 0        | Point 5                                                       | #                                           | 500.0  | -2.0000          | 3.0000            |          |
| Calibration Stability                           | 8             | Days             | 0        | Point 6                                                       | #                                           | 800.0  | -2.0000          | 3.0000            |          |
| Interval                                        | Lot           | Interval         | Lot      | Point 7                                                       |                                             |        |                  |                   |          |
| OD DELTA CHECK                                  |               |                  |          |                                                               | <input type="checkbox"/> Reagent Blank      | 0.0000 |                  |                   |          |
|                                                 |               |                  |          |                                                               | <input type="checkbox"/> Calibration        | 0.0000 |                  |                   |          |

# User Defined



Reagent Name Hydrocodone 300 S/Q REF C68823 DxC 500 AU and DxC 500i Urine Settings

Calibrator Name LZI Hydrocodone 300 Semi-Quantitative Calibrator Ref C68807, C68831

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| PROZONE CHECK PARAMETERS               |                                 |                                          |                                |                                        |                                 |                 |                                |                                        |                                 |                 |                                |
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| <input type="checkbox"/> Logic Check 1 |                                 |                                          |                                | <input type="checkbox"/> Logic Check 2 |                                 |                 |                                | <input type="checkbox"/> Logic Check 3 |                                 |                 |                                |
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| Point 1                                | <input type="text" value="0"/>  | Value 1                                  | <input type="text" value="0"/> | Point 1                                | <input type="text" value="0"/>  | Value 1         | <input type="text" value="0"/> | Point 1                                | <input type="text" value="0"/>  | Value 1         | <input type="text" value="0"/> |
| Point 2                                | <input type="text" value="0"/>  | Value 2                                  | <input type="text" value="0"/> | Interval                               | <input type="text" value="1"/>  | Value 2         | <input type="text" value="0"/> | Interval                               | <input type="text" value="1"/>  | Value 2         | <input type="text" value="0"/> |
| Point 3                                | <input type="text" value="0"/>  | Value 3                                  | <input type="text" value="0"/> |                                        |                                 |                 |                                |                                        |                                 |                 |                                |
| Limit Points                           |                                 |                                          |                                | Limit Points                           |                                 |                 |                                | Limit Points                           |                                 |                 |                                |
| Limit 1                                | <input type="text" value="0"/>  |                                          |                                | Limit 1                                | <input type="text" value="0"/>  |                 |                                | Limit 1                                | <input type="text" value="0"/>  |                 |                                |
| Limit 2                                | <input type="text" value="27"/> |                                          |                                | Limit 2                                | <input type="text" value="27"/> |                 |                                | Limit 2                                | <input type="text" value="27"/> |                 |                                |
| Check Pattern                          |                                 |                                          |                                |                                        |                                 |                 |                                |                                        |                                 |                 |                                |
| Pattern                                |                                 | <input type="text" value="Pattern 1 ▼"/> |                                |                                        |                                 |                 |                                |                                        |                                 |                 |                                |